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TREATISE

ON

GONORRHŒA VIRULENTA,

AND

LUES VENEREA.

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AND

LUES VENEREA.

BY

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A

TREATISE

ON

GONORRHŒA VIRULENTA,

AND

LUES VENEREA.

CHAP. IV.

On LUES VENEREA.

SECTION I.

General Obſervations on Lues Venerea.

THE Lues Venerea, Syphilis, or Venereal Diſeaſe, was firſt deſcribed with accuracy by the authors who flouriſhed about the end of the fifteenth cen-

tury. This induced many to imagine that it was not previouſly known in Europe; and Columbus, with his followers, having about this period returned from their firſt expedition to the Weſt Indies, it has been ſuppoſed that they brought this diſeaſe along with them.

That the venereal diſeaſe might be met with by Columbus when he firſt landed in Hiſpaniola, I will not diſpute. Like many other diſeaſes, it might not be peculiar to one ſet of people, or confined to one hemiſphere of the globe; but many arguments might be adduced to ſhow that it was well known in the old continent, and that it prevailed among the Jews, Greeks, and Romans, and their deſcendants, long before the diſcovery of America. This would lead, however, to a great length of diſcuſſion; and being more a matter of curioſity than of real utility, I ſhall not enter farther upon it at preſent.

Various definitions have been given by Noſologiſts of Lues Venerea, but the ſymptoms

toms of the disease are so numerous, and the appearances which it assumes are so complicated, that no definition sufficiently comprehensive and accurate, can be given of it. In some instances it appears in a particular spot only, and continues apparently local for a great length of time; while in a great proportion of cases it soon contaminates the whole system, producing a greater variety of symptoms than perhaps any other disease with which we are acquainted.

Different opinions have prevailed, respecting the manner in which Lues Venerea may be communicated, but it is now certain, that it can be produced in no other way than by the direct application of the matter of contagion to the surface of the body; or by passing, as other hereditary diseases do, from parents to their children. The virus cannot be carried, as was once imagined, from one person to another by the atmosphere, but it may be applied in various ways so as to communicate the disease.

1. In a great proportion of caſes the diſeaſe is given by one perſon to another in coition. The venereal matter reſting upon one or more points, excites ſmall inflammatory pimples termed chancres, from which it is carried by the abſorbents into the ſyſtem, for the moſt part producing, in its way, obſtruction and ſwelling in the contiguous lymphatic glands; and thus forming buboes in the groins.

2. It is frequently given by a diſeaſed child to a nurſe, in which caſe the nipples firſt become ſore, and the matter, as it paſſes into the circulation, excites ſwellings in the glands of the axilla.

3. An infected nurſe can ſcarcely give ſuck without communicating the diſeaſe to the child. When this happens from venereal ſores on the nipples, ſores of a ſimilar nature form on the lips of the child, and the matter from thence is taken up by the abſorbents. But a child

may

may alſo be infected merely by ſucking the milk of a diſeaſed woman. In this caſe, the diſeaſe does not always appear at firſt about the mouth of the child: It proceeds more readily to contaminate the ſyſtem than to produce any local effects. Many indeed allege that the diſeaſe cannot be communicated in this manner, and are of opinion that a child cannot be infected merely by the milk of a nurſe; I am convinced, however, from a variety of facts, that the opinion I have adopted is well founded; but we ſhall have occaſion to conſider it more particularly hereafter.

4. The fœtus may alſo be infected as it paſſes from the uterus by the matter of venereal ſores in the pudendum of the mother. Of this I have known different inſtances. In ſuch caſes, one or more ſores firſt appear in particular parts, from whence the matter is carried by the abſorbents into the ſyſtem.

5. I have known different inſtances of the diſeaſe being given to midwives in delivering women with venereal ſores about the pudendum.

6. In whatever manner the matter of Lues Venerea is applied to a wound, or to an inflamed or ulcerated ſurface, the diſeaſe will, in a great proportion of caſes, be produced. Surgeons, in dreſſing venereal ſores, are ſometimes infected in this way; and the diſeaſe has been communicated by performing the operation of blood-letting with a lancet that had previouſly opened a bubo.

7. Although we find in moſt inſtances of this diſeaſe, either that the matter has been directly applied to a wound or an ulcer, or that by its own acrimony it had induced both inflammation and ſuppuration before abſorption took place, yet caſes ſometimes occur in which nothing of this kind can be diſcovered, and where the matter is abſorbed while both the cutis and cuticle remain entire. This will moſt readily hap-

happen where the cuticle is thin, as is the case in the glans penis and lips. Hence the system has, in different instances, been infected by matter left upon the lips in kissing, and in drinking out of a cup recently used by an infected person, and in some of these without any ulceration being induced.

This mode of receiving venereal infection is not a frequent one, but as I have met with it in various instances, while the possibility of its existance is denied by many, I thought it right to mention it, in order to prevent these mistakes, and that mischief in practice which might arise from the prevalence of such an opinion.

So readily does the venereal poison enter the system, that it can scarcely be applied to any part of the surface of the body but with considerable hazard. For the reasons that I have mentioned, absorption will occur with more certainty in some parts than in others; but I know, from various facts, that scarcely any part of the skin is too thick to prevent it, particular-

ly if the parts have been rendered tender or irritable, either by inflammation or any other cauſe. Nay, it ſometimes happens where no affection of this kind is perceived. In two inſtances buboes occured in the axilla, and the patients were poxed by the matter of venereal ſores being applied to the fingers where the ſkin was found; and in another, the diſeaſe was communicated by the patient wearing the ſame breeches which he had uſed about three months before, when labouring under extenſive venereal ſores of the penis and ſcrotum, but of which he had been entirely cured. He knew that ſome of the matter had occaſionally dropped upon the breeches, but this did not occur to him till the diſeaſe appeared about the time I have mentioned, in the form of a large ulcer on the upper part of the penis, and without even the poſſibility of his having received the infection in any other manner.

It is ſomewhat remarkable that the venereal virus ſhould ſo readily enter the ſyſtem,

ſyſtem when applied to any part of the ſurface of the body, when we find, from a variety of facts, that the abſorbents of the ſtomach and inteſtines do not receive it. The matter of venereal ſores, when mixed with water uſed for waſhing them, has, in various inſtances, been ſwallowed by miſtake; but we have no inſtance of pox being produced by it.

In whatever way the matter of Syphilis is applied to the abſorbents, when it has once entered the ſyſtem, the effects which reſult from it are nearly the ſame; but at preſent, I mean, in a great meaſure, to confine the deſcription of the diſeaſe to its riſe and progreſs in the moſt ordinary form of it, where the infection is communicated by one perſon to another in the act of coition.

The plan which I mean to purſue is, in the firſt place, to give an account of the different ſymptoms of Lues Venerea in the order in which they commonly appear; and as our being able to aſcertain the appearance of every ſymptom with as much

much certainty as poſſible is an object of the firſt importance, I ſhall deſcribe each ſymptom under a diſtinct head, and at the ſame time ſhall point out ſuch circumſtances as moſt clearly ſerve to diſtinguiſh it from other affections to which it bears a reſemblance.

2. I ſhall offer a few obſervations on the nature of the venereal poiſon.

3. An account of the different remedies uſed in Lues Venerea, particularly of mercury, and its preparations.

4. I ſhall treat of the employment of theſe remedies in the different ſymptoms of the diſeaſe.

5. Of Lues Venerea, as it appears in new-born infants.

6. Of ſome peculiarities of form under which this diſeaſe has appeared in Scotland and in Canada.

7. I mean next to treat of prophylactics, or the means of preventing infection.

8. To consider how far Lues Venerea is ever productive of other diseases; and,

9. To give in an appendix formulæ of the medicines enumerated in the preceding parts of the work.

SECTION II.

Of the Symptoms of Lues Venerea.

§ 1. *General Observations.*

THE venereal disease appears occasionally, as I have already observed, in a great variety of forms. For the most part it occurs locally at first upon some part of the surface of the body, usually upon

upon the genitals, from whence it proceeds, and commonly with ſome regularity, to affect every part of the ſyſtem. In others, the firſt ſymptoms which take place indicates an affection of the conſtitution, and the diſeaſe, inſtead of appearing upon the ſurface of the body, affects either the throat, bones, or tendons.

When Lues Venerea is not interrupted in its progreſs by the uſe of mercury or other remedies, the following is the order in which the ſymptoms commonly appear, viz. chancres; buboes; ulcers and inflammation in the throat; ulcers in the mouth, and noſe; eruptions, or blotches, on the ſurface of the body; ulcers in different parts; nodes, and ſwellings in the perioſteum, bones, and tendons; excreſcences about the anus; ſwellings of the teſtes; loſs of hair from all parts of the body; blindneſs, loſs of hearing, and other anomalous ſymptoms. In this order I ſhall proceed to treat of them.

§ 2.

§ 2. *Of Chancres.*

The firſt effect which uſually reſults from the application of the matter of Lues Venerea to any part of the ſurface of the body, is a ſlight degree of inflammation. The part becomes itchy, red, and in ſome degree painful; and nature endeavouring to waſh away the irritating cauſe, a quantity of ſerum is thrown out under the cuticle, in the form of a ſmall boil or pimple. This ſoon burſts, and leaves a ſore of a correſponding ſize, foul and ſloughy at the bottom, with hard retorted edges, and which, from the corroding appearance which it aſſumes, has by the French been denominated Chancre, a term which we have alſo adopted.

Chancres do not appear at any certain period after the application of the virus. I have known them form in leſs than twenty-four hours, while in others ſix weeks have elapſed. Three or four days is

is the moſt frequent period. The patient at firſt feels a ſenſe of titulation over all the glans, and this is often productive of a frequent deſire to void urine. On examining the parts ſome degree of tenderneſs is often perceived over the whole, but the chancre itſelf is ſeldom at firſt larger than a millet ſeed.

The cauſe of chancres appearing at ſuch different periods after the matter of infection has been communicated, is not always obvious; but we may ſuppoſe it to depend in ſome degree upon the acrimony of the matter, and this again upon the matter being more or leſs diluted with ſerum, mucus, or pus. It may alſo in ſome meaſure depend upon the ſtate of the parts to which the matter is applied. As theſe are more or leſs irritable, inflammation will more or leſs readily take place from the application of the virus; and where the parts to which it is applied cannot be irritated, and where inflammation is not therefore produced, no chancres will enſue.

Chancres appear occasionally over all the external parts of generation, and in some instances, even on the contiguous parts. I have known them form over the whole scrotum, on all parts of the penis, and even on the lower region of the abdomen, immediately above the pubes. They may indeed form on all the soft parts of the body, but they are most frequently seated on the glans penis, and on the preputium near to its connection with the glans; the former being covered with cuticle only, and the latter being a thin production of the cutis vera, both are easily made to inflame. We also remark that chancres are frequent about the frenum, from the doublings of the skin being here particularly apt to retain the matter by which they are produced. In some instances they form on the very point of the glans, and even altogether within the verge of the urethra. Here, as well as when near to the frenum, they prove always more troublesome, and more difficult

cult of cure, than in other parts of the penis.

There is ſometimes only one chancre, but for the moſt part we meet with two, three, or even more; nay, in ſome inſtances, they cover the prepuce almoſt entirely. In this caſe, when they run into one another, none of them are diſtinct, and the whole, when thus connected, give the appearance of a foul ulcer, with hard edges, an unequal ſurface, and diſcharging a fœtid, ill-conditioned matter.

The colour, quantity, and conſiſtence of the matter of chancres is exceedingly variable. It is uſually of a dirty green colour, and often tinged with red, the conſiſtence thin, and the quantity large in proportion to the ſize of the ſores. This laſt circumſtance may be owing to the contiguous parts being apt to inflame, and although not ulcerated, to afford matter which we cannot eaſily diſcriminate from the diſcharge of the chancres.

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In a great proportion of cafes the appearances of chancre are fo nearly the fame that no perfon of experience can be under any doubt concerning them; but, as they fometimes vary in fize, form, and other circumftances, fome difcernment is occafionally required to diftinguifh between them and fores of a different kind. The diagnofis of chancres is indeed a point of much importance in practice. We are apt to conclude that every fore upon the genitals is of a venereal nature, a circumftance which has fubjected many to much inconvenience and diftrefs. Mercury is commonly prefcribed, but where the cafe is not venereal no advantage is derived from it, and the patient, after a tedious and painful confinement, finds the fores in no better ftate than at firft. In all fuch affections we fhould recollect that the penis and contiguous parts are liable to excoriations, pimples, and other eruptive complaints, equally with the reft of the body; nor fhould we too rafhly fuppofe, as is frequently done, that all fuch

appearances proceed from a veneral caufe. It is not often indeed that we can be in doubt upon this point, for chancres, in moft inftances, are fo diftinctly marked that there is no room to hefitate concerning them; but where they do appear in a doubtful form, and efpecially if the patient has been liable to affections fimilar in appearance, and where no venereal taint could be fufpected, fome time fhould always be allowed to pafs before any decifive opinion is given. When fores of this kind are of a fimple, innocent nature, they ufually heal in the courfe of a fhort time, merely by being kept clean, while they will gradually become worfe if they are venereal if mercury be not employed, or if they are not treated with efcharrotic or aftringent applications. In all fuch circumftances no remedy fhould be made ufe of that can either promote or retard the cure of the fores, till we are enabled by farther obfervation to afcertain of what nature they really are.

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We are moſt apt to doubt of the nature of theſe ſores, when, inſtead of being ſmall and circumſcribed, they ſpread and occupy more ſpace than chancres uſually do. A real venereal chancre is ſeldom ſo large at firſt as the baſe of a ſplit-pea, and the edges of the ſore are elevated, ſomewhat hard, and painful; but although this is very commonly the caſe, yet, in a few inſtances, it is ſo much otherwiſe, that inſtead of a ſmall circumſcribed ſore, we obſerve a ſlight ſuperficial ulceration, not attended either with pain or hardneſs, and which, by the conſequences alone, we find to be venereal. In all ſuch caſes certainty will be obtained from time and obſervation, and in no other manner. Nor can any harm enſue from a ſhort delay; for while this will commonly determine the queſtion, the ſame courſe of treatment will afterwards prove effectual which would have done ſo at firſt; and in this manner ſores may be often cured in the courſe of a few days, in which, if a courſe of mercury had once been entered upon, confinement for ſeve-

ral weeks would have been judged adviſe-able.

Beſides the varieties of chancre which I have mentioned, there is another, which it is proper to notice. Inſtead of appearing in the form of ſmall circumſcribed pimples, or ſuperficial ſores, ſuch as I have deſcribed, they become ſuddenly elevated into extenſive veſications. In theſe, a thin, clear lymph is ſometimes contained; but more frequently the lymph is tinged with blood. The livid appearance with which this is accompanied gives at firſt cauſe to ſuſpect that mortification may enſue, and accordingly chancres of this deſcription have uſually been judged to be of a more dangerous nature than others. I have not found, however, that this is the caſe. Their colour ſeems to depend entirely on the quantity of blood mixed with the ſerum which they contain, and on their contents being diſcharged, and the cuticle removed, the parts beneath have the appearance of a clean, excoriated ſurface,

face, without being affected in any other manner.

When chancres are properly treated from their commencement, they commonly assume a healing appearance in the course of a few days; but in some instances, owing to neglect, in others to some peculiarity of constitution, and perhaps occasionally to the matter of infection having been particularly virulent, instead of becoming clean, and of a red, healthy complexion, and which they always do before a cure takes place, they become daily more foul, and at the same time more extensive, and if their progress be not stopped by a judicious external treatment, combined with a proper course of mercury, they proceed to form sores of a very considerable magnitude. The danger from these, when seated in the preputium, is inconsiderable; but in the glans, this variety of chancre is apt to go to such a depth as to prove very alarming. The danger is sometimes great from the hæmorrhages with which they are accompanied, and we are

often aſtoniſhed at the rapid progreſs of the ſores. In ſome inſtances they extend ſo quickly as to deſtroy a great part of the penis in the courſe of a few days.

This rapid progreſs, which chancres in ſome inſtances make, is, for the moſt part, ſuppoſed to depend upon ſome peculiarity in the conſtitution of the patient; for, in general, chancres remain circumſcribed, and nearly ſtationary, for a great part of their duration. But I have reaſon to think, that in ſome inſtances it proceeds from the nature of the matter by which they are produced: I conclude that it is ſo from chancres of this deſcription being much more frequent at particular times than at others, and from obſerving them at the ſame time in different people receiving the infection from the ſame woman. About two years ago I met with more inſtances of this phagadenic chancre in the ſpace of three or four months than I had ſeen for ſeveral years before, and in four of them the infection was traced to the ſame woman:

The

The chancres in all of them appeared early, and made ſuch rapid progreſs that very troubleſome hæmorrhages occurred from them in the ſpace of three or four days from their firſt appearance; and in a ſmall town to which I was lately called for an alarming hæmorrhagy, produced by an ulcer of this kind, the ſurgeon in attendance informed me that in the ſpace of a few weeks he had met with three inſtances of the ſame nature, and in which the infection was alſo traced to the ſame woman.

Chancres of every kind, and in all their ſtages, are liable to inflame when roughly treated, particularly when the parts are much fretted by walking, or riding on horſeback. This ought to be attentively guarded againſt, for inflammation not only promotes the abſorption of the venereal virus, as we ſhall more particularly hereafter have occaſion to mention, but when it affects the preputium, phymoſis is commonly the conſequence, and it proves always an untoward occurrence,

as it prevents free accefs to the fores beneath, a point of the firft importance in the treatment of chancre.

In women, chancres have precifely the fame appearance as in men. They occur chiefly upon the internal parts of the labia pudendi, on the nymphæ, clitoris, and entrance of the vagina and urethra, but they are feldom or never altogether within either of thefe paffages. They are moft frequent about the under parts of the labia, owing to the matter producing them being moft apt to reft here, and from the fame caufe they often form upon the perineum, near to the anus. In this fituation they prove always highly diftrefsful, and are more apt to terminate in deep and extenfive ulceration, than in parts not fo liable to be injured; for here they are fretted by every motion of the limbs, nor can the patient be feated without preffing upon them.

Whether in men or women, chancres on parts covered with firm fkin have a very different appearance from fuch as occur

cur upon parts more thinly protected. Instead of small circumscribed pimples, such as I have described, the skin appears red and tender for a day or two, and without being previously elevated into small vesicles, ulcerations break out at once. A fœtid viscid matter oozes out, which, on being removed, leaves the bottom of the sores of a deep red colour, and their edges inflamed and ragged, and however entirely this matter may be wiped off, it is soon renewed, and in the space of a few hours forms into a thick firm crust, which either remains till it be torn off, or till it be completely separated from the contiguous parts by the formation of new matter beneath. This kind of sore is most frequent in parts covered with hair, particularly about the root of the penis in men, and above the pubes, and on the perineum in women.

§ 3. *Of Buboes.*

A venereal bubo is a painful ſwelling of a lymphatic gland, produced by abſorption of the venereal virus. The whole ſurface of the body having abſorbents ſpread upon it no contagious matter can be applied to any part of it but with the riſk of injuring the conſtitution. In various inſtances of Lues Venerea the ſyſtem is infected by the matter being carried directly into the blood, but in others a ſwelling previouſly takes place in one or more of the lymphatic glands lying between the part to which the matter is firſt applied and the heart.

Theſe glands being formed by convolutions of the lymphatic veſſels, are apt to be obſtructed by any irritating matter which enters them. Hence a venereal bubo is a very frequent ſymptom of the diſeaſe; and, as it is alſo one of theſe which gives the greateſt diſtreſs and perplexity both

both to patients and practitioners, I ſhall give a more minute deſcription of it than might otherwiſe have been neceſſary.

The points of moſt importance in the hiſtory of buboes, and which we ſhall therefore be particularly anxious to aſcertain, are, the ſtate of parts moſt favourable to their production; their moſt frequent ſituation; the appearances which they aſſume at different periods of their duration, and the means of diſtinguiſhing them from other ſwellings which they reſemble.

I have already obſerved, that the venereal virus may be abſorbed where the ſkin is ſound and entire: Hence Lues Venerea may take place where no external mark can be diſcovered upon the part to which the matter of infection was applied. It muſt be admitted that this is by no means a common occurrence; but I have met with it in ſuch a number of well-marked inſtances, that I have no more doubt of the fact than of any other that falls daily and clearly within our obſerva-

tion. It has happened too in almoſt all of theſe, that a bubo was one of the firſt ſymptoms of the diſeaſe. I have now upwards of twenty caſes recorded of bubo taking place where not a veſtige could be traced either of previous Gonorrhœa, chancre, or excoriation.

As the firſt two or three caſes of this which occurred to me gave riſe to a good deal of difficulty, by the uncertain and undeciſive practice with which they were attended, I think it right in this manner to make it known. At that time it was an eſtabliſhed opinion, as it ſtill is with many, that buboes cannot take place without ſome previous formation of matter in the contiguous parts. In the caſes to which I allude the cure was therefore protracted to a great length; for till the nature of the diſeaſe became more obvious, and which ſometimes did not happen till other ſymptoms appeared, the uſe of mercury, from which alone relief could be obtained, was commonly poſtponed. The ſwelling was either ſuppoſed to proceed from

from a ſtrain in walking or riding, or to originate from ſcrophula, by which a good deal of time was loſt to no kind of purpoſe.

In a former part of this work we have ſeen that ſwellings take place in the glands of the groin from inflammation produced by gonorrhœa: Theſe have, with ſufficient propriety, been termed ſympathetic buboes, and they are by no means uncommon; but the real idiopathic bubo, proceeding from abſorption of ſyphilitic matter, is, in a great proportion of caſes, preceded by ſome obvious local mark of the virus in the contiguous parts, moſt frequently by chancre. The matter paſſes ſo evidently from the chancre along the lymphatics to the contiguous glands, that one or more of theſe veſſels are often found hard, and in a ſtate of enlargement, in their courſe from the ſores to the glands. This, in ſome inſtances, may happen from inflammation excited by the virus; in others, it may be altogether the effect of obſtruction to the paſſage of the

the lymph. In ſome caſes the lymphatics in this ſtate of enlargement become totally unfit for the purpoſes of abſorption; abſceſſes form in them; and on theſe burſting, they are ſucceeded by troubleſome ſores.

Chancres, in all their ſtages, and in every period of their duration, will occaſionally produce buboes; but it is worthy of remark, that they ſeldom occur but with previous marks of inflammation: Hence buboes are moſt frequent in the incipient ſtate of chancres, while the inflammation by which they were produced ſtill prevails. Indeed more buboes take place during the firſt eight or ten days from the appearance of chancre than in any other period of equal extent in the whole courſe of the diſeaſe. When the original inflammatory ſtate of chancres is over, and the parts are merely ulcerated without being painful, they will continue in this ſituation for a great length of time, without any tendency to buboes being perceived, till inflammation is by ſome cauſe or other in-

induced upon them: Hence we find buboes very frequently occur ſoon after cauſtic has been applied to chancres, and not uncommonly after the parts have been dreſſed with precipitate or any irritating ointment. The pain which theſe occaſion tends, in the firſt place, to create ſome degree of inflammation, to which buboes very frequently ſucceed.

It is not however the higher degrees of inflammation which prove moſt favourable to the production of buboes. When inflammation ſuddenly takes place to a great height, and ſpreads along the lymphatics leading from chancres, the ſyſtem is not apt to be infected. Theſe veſſels appear to be deprived by a great degree of inflammation, of the power of abſorption, probably by their being rendered impervious; but it is equally certain, as I have already obſerved, that every ſlight degree of inflammation, as well as whatever tends to ſtimulate the extremities of abſorbents, excites them more or leſs to action, and thereby tends to in-

creaſe

creaſe their power of abſorption. Of this we have daily proofs in the practice of inoculating for the ſmall pox, where we find that infection very rarely takes place, perhaps not once in a thouſand inſtances, if the wound at which the matter of infection was introduced is not excited to inflame: Hence the more irritation that is excited at the time of the innoculation the more certainly is the diſeaſe communicated.

We may here mention another inſtance of the effect produced by the irritation of lymphatics in promoting abſorption. In the application of unctuous ſubſtances to the ſurface of the body, particularly in the uſe of mercurial ointment, the power of friction is univerſally admitted; and we cannot ſuppoſe that it acts in any other manner than by ſtimulating the abſorbents of the parts. Some indeed have aſſerted, that in matters of this kind no advantage is derived from friction, and that the abſorbents would act with equal influence although the ointment was merely applied

plied to them; but this is so directly contrary to the observation of all who have attended to the effects of friction in such cases, that no farther notice need be taken of it *.

It has been remarked that old venereal ulcers do not produce buboes, and this has given rise to an opinion that the matter produced by these sores is not of a venereal nature, that is, that it would not contaminate the system were it carried into the blood by the absorbents. Mr. Hunter was, I believe, the first who advanced this opinion, and I do not know that it has yet been publicly controverted; but so far as my observation goes I can decidedly say that it is not well founded. I admit that buboes, or swellings of the lymphatic glands, do not often proceed from venereal sores of long duration, particularly from such as arise from infection of the sys-

* It seems to be surprising that Mr. Hunter should hazard an opinion to this effect. Vide Treatise on the Venereal Disease by John Hunter.

tem; but although they are not frequent, yet in various inſtances we meet with them. I have ſeen them in the neck, from ulcers in the throat; in the groin, from ſores on the toes and feet; and in the axilla, from ulcers on the fingers and hands: and the cauſe of their not being more frequent may be eaſily explained. We have juſt had occaſion to remark, that abſorption of the matter of Lues Venerea does not often happen if the parts to which it is applied do not inflame. Now we know that it is one of the moſt characteriſtic circumſtances of old venereal ſores, their being ſeldom accompanied with inflammation. This is particularly the caſe in ulcers of the throat, where inflammation ſeldom takes place to any diſtreſsful height. Swellings of the glands in the neck very ſeldom happen therefore from this cauſe, but ſtill they are occaſionally met with; and I believe that they happen as frequently here, in proportion to the frequency of the true venereal inflammation which takes place in theſe ſores, as in

in any other part of the body. They occur more frequently in the groin and arm-pit, from ulcers on the extremities, than they do in the neck from ulcers in the throat; but this happens obviously from ulcers of these parts being more apt to inflame than venereal ulcers in the throat; and it serves as a farther proof of the effect of inflammation in increasing the absorbent powers of the lymphatics.

In a former work I have shewn the propriety of distinguishing venereal ulcers into two kinds. Chancres I would denominate primary ulcers, being the root or source of all farther infection, while all those may be denominated symptomatic which arise from the syphilitic virus having entered the system. That chancres should be more of an inflammatory nature than symptomatic ulcers, and therefore that the matter produced by them should be more apt to stimulate the absorbents is not surprising; for we can readily suppose that the matter of these

old ulcers muſt be rendered mild by being diluted. Even the matter of chancres becomes leſs virulent when the diſeaſe has been of long duration; and the diſcharge of an ulcerated bubo, although the bubo itſelf was produced by a chancre, is evidently of a milder nature than the diſcharge of chancres; for we ſeldom or never ſee new buboes ariſe in the glands lying contiguous to an old bubo in a ſtate of ulceration: But we cannot ſurely imagine that this proceeds from the matter of theſe ſores not being venereal. I believe it to depend upon the cauſe which I have mentioned. The matter of a ſore in this ſituation muſt be continually diluted by the lymph which is at all times paſſing into the gland. This may render it ſo mild that it will not be capable of ſtimulating the contiguous glands, ſo as to form obſtructions in them. It will rather paſs eaſily along with the lymph into the general maſs of blood; nor will it produce any immediate or obvious effects, even when it has entered the ſyſtem; for when thus

thus diluted by all the blood in the body, ſome quantity muſt be required to accumulate before any irritation will enſue; and till ſome degree of irritation is excited no evident effect will take place. It muſt either exiſt in ſuch a ſtate of acrimony, or in ſuch quantity as to be capable of exciting irritation in ſome part of the ſolids, otherwiſe no mark of diſeaſe will occur from it: Hence may be accounted for all thoſe inſtances of Lues Venerea breaking out at very diſtant periods after infection was communicated, and of the difference which in this reſpect we meet with in different patients; the diſeaſe in ſome breaking out in the courſe of two or three weeks from the time of infection, while in others it does not appear for eight, ten, or twelve months. Nay, there is reaſon to think that in ſome it has not appeared till ſeveral years have elapſed, and of which I could adduce ſuch proofs as ſeem to render it certain.

That the matter of old venereal ſores is

capable of communicating infection few I believe will doubt. Many decisive proofs might indeed be given of it, but I shall only mention the following. When the matter of a chancre excites swelling in the contiguous glands we have few instances of the virus passing into the constitution. The glands will remain enlarged for a considerable time without any mark of the system being injured, probably from the matter of infection being stopped in its progress by the diseased state of the glands; but when buboes become ulcerated, if mercury be not employed, the disease, for the most part, soon breaks out in the throat and other parts of the body from the matter of these secondary or symptomatic sores having entered the circulation. In some instances, as I have mentioned above, a considerable time elapses before the constitution is affected by the matter of these sores, but it scarcely ever fails of shewing itself at last, and not unfrequently in the course of a short time from

from the ulceration of the bubo taking place.

When to this we add, that ſores of this deſcription are cured in the ſame manner with every other ſymptom of the venereal diſeaſe; that they daily increaſe in depth and extent till mercury is employed; and that they commonly put on a healing appearance in the courſe of a ſhort time after this medicine has been uſed, no doubt can remain of their being altogether venereal. Every practitioner knows that in the treatment of venereal ulcers ſores ſometimes remain after every attempt that we can make for curing them, and long after the virus of the diſeaſe is removed by mercury. This, as we ſhall hereafter have occaſion to mention, may happen from various cauſes; but it is not this ſtate of theſe ulcers which we have now been conſidering: It is the real venereal ulcer of which we are now ſpeaking, where the nature of it has not been changed, nor the virus of the diſeaſe removed by the uſe of mercury.

Venereal buboes are moſt frequently ſeated in the groin. This neceſſarily happens from the manner in which Lues Venerea is uſually communicated; for it is the lymphatic glands moſt contiguous to the parts firſt infected that moſt commonly ſwell. There are few inſtances indeed of the virus paſſing through theſe and fixing upon others: Hence buboes ariſing from ulcers of the lips and gums are ſeated under the tongue, and beneath the lower jaw; from ulcers in the throat, the glands of the neck become affected; from ſores on the fingers and hands, the glands ſwell about the wriſt, elbow, and in the axilla; and the glands about the knee, and on the upper part of the thigh, are moſt apt to ſwell from ſores of the toes and feet.

In each groin, and ſomewhat higher than the root of the penis, there is a cluſter or ſtring of lymphatic glands, chiefly formed by the lymphatic veſſels of the penis and contiguous parts. It is the moſt contiguous of theſe glands to the penis that

that are moſt frequently obſtructed by the matter of chancres. It is proper, however, to remark, that buboes ſometimes occur from the ſame cauſe in a ſtring of glands lying upwards of an inch lower than theſe, owing to the lymphatic veſſels of the penis paſſing in ſome inſtances out of their uſual courſe and ſtretching down to theſe glands. From want of attention to this ſtructure of parts, buboes in this ſet of glands have commonly been ſuppoſed to proceed from the ſyſtem being infected, unleſs where they could be obviouſly traced to an ulcer in the foot or leg; but we may here obſerve once for all, that buboes never occur from a general affection of the ſyſtem alone. They proceed, I believe, in every inſtance from matter abſorbed from a particular ſpot, and producing, as we have already perceived, obſtructions in the lymphatic glands lying in its courſe to the heart. So evidently do buboes originate from local affections, that in chancres of the penis it is commonly the glands in the correſponding

ſponding groin that ſwell. When a chancre is ſeated upon the frenum, or on any other part of the middle of the penis, the glands in both groins are equally apt to be affected; but when the chancre is confined to one ſide of the penis, or to one ſide of the ſcrotum, we meet with few inſtances of the glands in the oppoſite groin being obſtructed.

In a great proportion of caſes only one of the whole ſtring of glands becomes affected; but occaſionally it is otherwiſe. I have known four diſtinct buboes on one ſide, and three on the other at the ſame time, but here there have always been more chancres than one; for the moſt part indeed the penis in ſuch caſes is nearly covered with ſores.

Were the whole lymphatic glands between the heart and the part at which the matter of Lues Venerea enters the ſyſtem, liable to be affected with it this diſeaſe would be productive of ſtill worſe conſequences than commonly enſue from it. Glands ſituated within the cavity of the ab-

abdomen would ſwell and ſuppurate, from which the greateſt danger might be expected; but this does not happen. Scarcely an inſtance can be adduced of any internal glands being affected by the matter of ſyphilis; but this does not depend, as ſome have imagined, upon the tendency of this diſeaſe to affect the more external parts of the body only. The moſt obvious cauſe of it is, that the venereal virus is always abſorbed from the ſurface of the body; we have ſeen that it is always the firſt glands it meets with in which obſtruction occurs; and I have ſuggeſted what appears to be the moſt probable reaſon of the glands ſituated beyond ſuch as are affected at firſt not being liable to ſuffer in future, viz. the ſtop which the ſwelling of the firſt of theſe glands gives to the farther abſorption of matter, and the diluted ſtate of the matter in the progreſs of the diſeaſe, by which it becomes incapable of exciting that degree of irritation neceſſary to produce abſorption, or, if abſorbed, that it is rendered ſo mild as not readily

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to produce obſtruction in any of the glands to which it is carried. If the matter of Lues Venerea was applied to any internal part of the body, ſo as to excite ulceration, we have no cauſe to doubt of the effects reſulting from it being the ſame that enſue from the external application of it. The contiguous glands would be firſt affected, and from thence it would proceed to the reſt of the ſyſtem; but the diſeaſe never being communicated in this manner none of the glands ſeated internally can ever be affected.

Theſe circumſtances being premiſed, I ſhall now enumerate the appearances and ſymptoms of buboes, with the means of diſtinguiſhing them from ſwellings which reſemble them. It muſt be kept in view that it is the real venereal bubo of which we are now ſpeaking, and not that inflammatory ſwelling with which the glands in the groin are often attacked in Gonorrhœa. A deſcription of that ſwelling is given in Chap. III. Sect. IX.

The moſt frequent ſeat of bubo, as we have ſeen, is in the groin, and a de-

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ſcription of it in this ſituation will be ſufficient. The firſt ſymptom of bubo is a ſlight degree of pain. This excites the attention of the patient, when on handling a ſmall hard knot is diſcovered. In ſome caſes this is accompanied both with pain and tenſion, ſtretching along an enlarged lymphatic veſſel, in the form of a ſmall cord, all the way to the penis; but for the moſt part the tumour is diſtinct, and not apparently connected with any other affection. Even where two or more buboes take place at the ſame time, although near to each other, they are always diſtinct and unconnected at firſt, inſomuch that the patient himſelf very commonly points them out.

If mercury or other diſcutients be not now employed the tumour becomes gradually larger, and from being, as it commonly is when firſt perceived, of the ſize of a kidney bean, by the eighth or tenth day, and often ſooner, it is uſually of the ſize of a pigeon's egg. From the firſt appearance of a bubo there is ſome degree of

of rotundity in the form of it. In the middle it is ſomewhat raiſed and prominent, and becomes flattened towards the ſides, and this continues during the whole progreſs of the ſwelling. As the ſize of the tumour increaſes it alſo becomes more painful, and the pain, which at firſt was confined to the bubo itſelf, ſpreads over all the contiguous parts. The patient complains upon the ſlighteſt degree of preſſure, and he cannot walk or move but with much uneaſineſs.

Even when of this ſize, buboes will ſometimes be removed by diſcuſſion; but when this does not happen, the ſwelling, which till this period uſually retains a conſiderable degree of firmneſs, becomes in a gradual manner ſofter, and more prominent; the ſkin, which for ſome time retained its natural colour, becomes red and tender; ſome degree of fever is apt to take place, and it is often accompanied with ſlight ſhivering fits. A fluctuation of matter is at length diſcovered, at firſt upon the ſurface of the tumour,

mour, and afterwards through a confiderable part of the whole of it, and on this being difcharged, either by the tumour burfting or by an opening being made into it, the parts are found to have all the appearances of a common abfcefs containing purulent matter.

The time which elapfes in this progrefs of bubo, from the firft appearance of the fwelling till maturation is completed, is exceedingly variable, and depends upon a number of circumftances; upon the age and habit of body of the patient; upon the degree of pain and fever which take place; and on the gland being fuperficial or deeply feated; for we find by experience that deep-feated fwellings do not fo eafily or fo quickly fuppurate as thofe which are immediately beneath the fkin. Where the conftitution is much relaxed and debilitated, buboes often remain indolent and ftationary for a great length of time, while during the full vigour of health and youth, they ufually come quickly for-

ward.

ward: When accompanied with much pain and ſome degree of fever, from the firſt their progreſs in general is rapid, while they always advance ſlowly when the pain is inconſiderable. This general obſervation may be made upon the maturation of venereal buboes, that they ſuppurate more quickly than glandular ſwellings of any other kind, and more ſlowly than common abſceſſes in the cellular membrane. Thoſe who have not had much experience in this branch of buſineſs are apt to imagine, from the deſcription which they have peruſed of the appearances of buboes, and perhaps from their having met with a few inſtances of the diſeaſe in its ordinary form, that no difficulty or doubts can occur concerning them; but this is far from being the caſe. Where a glandular ſwelling, ſuch as I have deſcribed, appears in the groin, either during the continuance of chancres, or ſoon after ſores of this nature have healed, there will be no cauſe to doubt of its being venereal: But buboes do not al-

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ways appear in a ſimple unmixed ſtate. They are ſometimes combined with other affections, where they neceſſarily aſſume other appearances; and they occur in ſome inſtances, as I have already mentioned, without being preceded by the leaſt veſtige of ulceration. This laſt circumſtance of itſelf is commonly productive of doubt, but the difficulty is always increaſed when the ſwelling which takes place is not altogether venereal.

Swellings with which buboes may be confounded, and from which therefore it is proper with as much accuracy as poſſible to diſtinguiſh them, are of different kinds. In ſome caſes theſe ſwellings occur in a ſimple unmixed ſtate, in others they are blended with the real venereal bubo.

1. The moſt frequent cauſe of this kind of perplexity, is ſcrophula. When the venereal diſeaſe takes place in ſcrophulous conſtitutions, buboes, as well as almoſt every other ſymptom, not only be-

come much more obſtinate, but aſſume appearances perfectly different from ſuch as occur in the ordinary form of either of theſe diſeaſes. Nor is it neceſſary that practitioners only ſhould be acquainted with this. It ought to be made known in the moſt unequivocal manner to patients, otherwiſe they are apt to be perplexed and diſappointed, and to blame thoſe who have the charge of them, for what it is not often in the power of art to prevent.

Where evident ſymptoms of ſcrophula have previouſly taken place, or where that diſeaſe obviouſly exiſts at the time, there is no great difficulty of convincing patients of any ſymptom of Lues Venerea with which they are attacked, being likely to partake of it; but they ſhould alſo know, that during the continuance of Lues Venerea, ſymptoms of ſcrophula frequently appear where that diſeaſe was not previouſly ſuſpected to exiſt, and which otherwiſe might never have taken place. Of this I have met with many inſtances,

where a ſcrophulous taint, which had till then remained concealed, broke out at once with much violence on the ſyſtem being infected with Lues Venerea.

We judge that a ſwelling of this kind partakes of ſcrophula, when, inſtead of yielding to a proper application of mercury, or coming forward to ſuppuration in the time which venereal buboes commonly require, it either remains ſtationary or advances in that ſlow gradual manner peculiar to tumours of a ſcrophulous nature. Tumours altogether venereal do not advance ſo rapidly as common abſceſſes, but they come much more quickly forward than ſcrophulous ſwellings. In moſt inſtances, a venereal bubo that is allowed to ſuppurate arrives at full maturity in the ſpace of four or five weeks; often in leſs time than this, from its firſt commencement; whereas, when conjoined with ſcrophula, two or three months will paſs over before this takes place. The pain, inſtead of being ſmart, as happens in buboes, is more of a dull obtuſe nature.

The ſwelling at firſt, inſtead of being firm, as we have deſcribed it to be in buboes, is ſomewhat ſoft and compreſſible, like dough; and even when matter is fully formed in it, the firmneſs and tenſion attending it is leſs. Neither is the redneſs of the teguments, which takes place as the ſwelling comes forward, of ſuch a bright hue as in buboes.

This kind of connection between Lues Venerea and ſcrophula, may, in ſome inſtances too, be diſcovered by the ſize of theſe tumours. The true venereal bubo is no doubt very variable in point of bulk, but it never becomes ſo large as tumours of this mixed nature commonly do. Few of the former ever ſurpaſs the ſize of a pullets egg, but the latter very commonly become two or three times larger than this. I have at preſent two inſtances of this kind of ſwelling ſtretching from the root of the penis, nearly to the ſpine of the ileum.

2. Venereal buboes are very apt, in the courſe of their progreſs, to be attacked with

with eryſipelas. When this does not take place till towards the latter ſtage of the ſwelling no cauſe for doubt occurs from it, as the real nature of the primary affection is previouſly rendered obvious. But when it occurs at firſt, as ſometimes happens, the practitioner, as well as the patient is thereby apt to be deceived. Tumours of this kind, inſtead of being circumſcribed, with their limits diſtinctly marked, as happens in buboes, are commonly diffuſed, and terminate in a more imperceptible manner in the contiguous parts. Inſtead of he vivid complexion of common inflammation, they are of a more deep copper colour, and the inflammation which takes place occurs ſuddenly, inſtead of approaching in a more gradual manner.

I may alſo remark, that the pain in theſe ſwellings accompanied with eryſipelas, gives more diſtreſs from the ſenſation which it communicates of a burning degree of heat than we ever meet with from theſe lancinating pains which take place in the latter ſtages of the true venereal bubo.

3. Lumber abſceſſes have in ſome inſtances been miſtaken for buboes. This, however, may at all times be eaſily avoided, and can never occur but from ignorance or inattention. Any perſon of experience will eaſily diſtinguiſh by examination with his fingers, the difference between the one and the other. In the one the ſwelling is ſeated in the cellular ſubſtance, while it is in the body of a gland in the other. Whoever has once handled theſe different parts in a tumified ſtate will be at no loſs to diſtinguiſh between them; and to thoſe who have not had this opportunity it is perhaps impoſſible to mark the difference by any deſcription that can be given of it. I may remark, however, that theſe two ſwellings are for the moſt part ſufficiently diſtinguiſhed by the ſymptoms which precede and attend them. If buboes be not always preceded by chancres, lumber abſceſſes are univerſally attended with pain about the ſmall of the back and in the loins. This ſymptom indeed

indeed very commonly occurs as a fore-runner to the appearance of the tumour in the groin, and almoſt in every inſtance, before the tumour appears, the patient is much debilitated by the fever with which he is attacked from the firſt formation of the diſeaſe, and which never in any conſiderable degree happens in bubo.

4. In ſome caſes, both inguinal and fœmeral herniæ have been miſtaken for buboes. Of this I have known different inſtances with patients; nor is it ſurpriſing that it ſhould be ſo, for both kinds of ſwelling appear nearly in the ſame part; they are neither of them attended with any alteration in the colour of the ſkin, when they firſt appear, and they are both, for the moſt part, accompanied with ſome pain; but ſtill the difference between them is ſo obviouſly marked that one can ſcarcely ſuppoſe it poſſible for any practitioner, however ignorant he might be, to fall into any difficulty upon this point, did we not know that in different inſtances it had

happened. Herniæ have not only been miſtaken for buboes, but buboes have been treated as herniæ.

Beſides the very marked diſtinction which occurs between buboes and herniæ, in the appearances and other circumſtances immediately connected with the tumours, and with which every practitioner ought to be acquainted, herniæ is for the moſt part ſufficiently diſtinguiſhed from the other by the ſickneſs, obſtruction of the bowels, and other ſymptoms with which it is accompanied, and which ought alſo to be ſo generally known that to enumerate them more particularly would be altogether unneceſſary.

5. Ulcers in the feet and legs, from whatever cauſe they may ariſe, occaſionally produce ſwellings in the glands of the thighs: Theſe, in ſome inſtances, have been miſtaken for buboes. The chief means of diſtinction are theſe; our knowledge of the exiſtence of ſuch a ſore as we have found by experience to be productive of

of tumours of this kind; the ſeat of the tumours, theſe ſwellings being commonly on the fore part of the thigh, and ſomewhat lower than the ordinary ſeat of buboes; and laſtly, their being attended with little or no pain, and very ſeldom proceeding to ſuppurate, but rather continuing indolent, and nearly of the ſame degree of hardneſs from the firſt. Even when they do contain matter the ſkin ſeldom loſes its colour; a circumſtance which never happens with buboes in a ſtate of ſuppuration.

Women labouring under the venereal diſeaſe are equally liable to buboes with men; and the diſeaſe is ſo exactly ſimilar in both that a deſcription of it in the one ſex renders it almoſt unneceſſary to ſpeak of it in the other. The only circumſtance in which they are different is the ſituation of the tumours.

From the courſe of the lymphatics not being exactly the ſame in women the ſite of buboes in them muſt neceſſarily be different. I met with one inſtance of the ſwelling exactly

actly upon the middle of the mons veneris; for the moſt part, however, they are ſituated on the courſe of the round ligaments, near to where they enter the abdomen, or higher in the groin, ſomewhat nearer the pudendum, than in men. Theſe laſt become equally large with buboes in men; but the others, it has been remarked, remain ſmall, and ſtill more circumſcribed than buboes in their ordinary ſituation.

The ſymptoms we have hitherto been deſcribing, viz. chancre and bubo, are at firſt always local; that is, they are never produced by, although they are very commonly productive of, what may be called the conſtitutional ſtate of the venereal diſeaſe. This has induced ſome to treat of theſe ſymptoms as diſtinct and unconnected with the conſtitutional affection; and there would be much propriety in their doing ſo, were it poſſible to determine when the matter of chancre or of bubo has entered the ſyſtem or not. But ſo far as I

know

know this has never been done; and there is much caufe to imagine that no attempt towards it will ever prove fuccefs-ful. Some ingenuity has been fhewn in endeavouring to afcertain the time which muft elapfe between the appearance of chancre and abforption by the lymphatics; and even during this period, the difeafe, it is faid, fhould be confidered as local. To me, however, all fuch attempts appear to be both futile and dangerous. The point in queftion can never, in my opi-nion, be afcertained; and while the con-trary idea prevails, the conftitution would in many inftances be injured, as it would be very apt to lead, as with fome it has already done, to a very hazardous prac-tice, a dependence in the treatment of thefe fymptoms upon local remedies. Chancres and buboes may both remain in a local ftate for a great length of time. Nay, it is poffible that their cure might fometimes be accomplifhed without any of the matter arifing from them entering

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the conſtitution; but as this is mere conjecture; as we have no method of knowing when this might be the caſe, and as we know from daily obſervation that in almoſt every inſtance the conſtitution is injured even by the ſlighteſt degree of theſe ſymptoms, I judge it in every reſpect better to treat of them as conſtitutional affections.

The next ſymptom we have to deſcribe is univerſally allowed to originate from the virus when it has entered the ſyſtem.

§ 4. *Of the Venereal Sore Throat.*

FROM whatever part of the body the matter of ſyphilis may have entered the lymphatics, we find that it is more apt to attack the throat than any other part. This does not happen, however, at any certain period. I have known it fix upon the throat in the courſe of ten days from the firſt appearance of a chancre, while in ſome inſtances it remains perfectly ſound till ſeve-

ſeveral months after every external mark of the diſeaſe has diſappeared.

In addition to what has already been ſaid upon this point I may obſerve, that the throat, as well as other parts of the body, are moſt apt to be ſoon affected when no buboes take place. When the matter paſſes directly into the ſyſtem, along the abſorbents, the infection ſhews itſelf more early than where it is firſt ſtopped by buboes and afterwards taken up by the lymphatics on theſe ſwellings becoming ulcerated.

In the venereal ſore throat the patient is uſually diſtreſſed with ſome degree of uneaſineſs in ſwallowing for ſome days before his attention is much excited towards it. He feels a ſenſation of fulneſs and tenderneſs, but not much pain. In ſome caſes this prevails over the whole throat, but for the moſt part on one ſide only. Unleſs there has been ſome recent cauſe for ſuſpicion the diſeaſe is attributed to cold; but the ſymptoms continuing, and an inſpection being made, an ulcer is in

moſt

moſt inſtances diſcovered on the part of which he complained in ſwallowing.

Theſe ulcers in ſome caſes make their firſt appearance upon the uvula, but they are much more frequent upon one of the amygdalæ. On firſt inſpection they are commonly ſmall, but always foul, and accompanied with ſome degree of fullneſs or ſwelling, and with an eryſipelatous redneſs of the contiguous parts.

In moſt inſtances the ulcer remains ſtationary for a conſiderable time, not going deeper than the thickneſs of a ſhilling, nor ſpreading to any greater extent than it occupied at firſt; but in others, unleſs the moſt effectual remedies are immediately employed, the ulcer not only becomes deeper, but ſpreads to a great extent, and in ſome caſes with ſuch rapidity, that I have known the uvula and all the contiguous parts affected in the courſe of a few days. In ſome the ulcer, in its courſe, gives only the appearance of foulneſs to the contiguous parts, which become covered with a yellow coloured ſlough, ſome-

what

what resembling the buffy coat of inflammatory blood, while in others it spreads in the form of a corroding sore, and destroys all the parts as it goes along. It sometimes destroys a great part of the tonsil before leaving it, but it more frequently spreads along the arch reaching from the tonsil, on which it is seated, to the uvula, and which, together with the contiguous parts of the velum pendulum palati, are commonly destroyed before the other tonsil becomes affected.

Even in this advanced state of these ulcers the patient seldom complains of much pain, if it be not during the action of swallowing. A general uneasiness is felt over the throat, but the pain is never so acute as the extent and appearances of the sores would give cause to expect. Wherever much pain takes place we find that it proceeds not from the sores but from that kind of erysipelatous redness with which the contiguous parts are very apt to be affected, and by which such a distressful burning sensation is sometimes

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induced over the whole throat as renders the patient at all times very uneaſy.

In ſome caſes of the venereal ſore throat this inflammatory redneſs takes place without any ulceration. If not prevented by mercury, ulcers would no doubt form at laſt; but I have known the parts remain ſwelled, and accompanied with that deep copper-coloured complexion which is very characteriſtic of theſe affections, for ſeveral weeks together, and without any degree of ulceration being perceptible. The diſeaſe in this ſtate, although it is commonly fixed on one ſide of the throat at firſt, is very apt to leave it ſuddenly and go to the other; and this we find will happen again and again, till the one ſide becomes ulcerated, by which it is kept fixed to a particular ſpot.

Where the throat is affected in this manner, that is, where it is attacked both with the venereal virus and eryſipelas, a very diſtreſsful ſymptom commonly takes place, a conſtant heat and irritation over the whole fauces, by which the patient is kept

kept under a perpetual desire of clearing his throat, of an acrid, viscid mucus, with which it becomes so much stuffed from time to time as to render a great deal of exertion for this purpose necessary; and it prevails equally at all times, even during meals, and when the patient should be at rest.

That it is chiefly by the irritability which takes place here that this acrid mucus is produced I conclude to be the case, from finding that nothing tends so much to remove it as soothing anodyne applications, conjoined with the internal use of opiates.

It is commonly too in this inflammatory state of sore throats that patients in Lues Venerea are seized with deafness. Deafness may happen from other causes, as we shall afterwards have occasion to mention, but in this case I believe it to proceed from the inflammation spreading to the tuba eustachiana, so as to render it impervious. Inflammation may act in producing deafness, either by stuffing this

paſſage with mucus or by exciting adheſion between the ſides of the duct. In the one caſe the deafneſs may only be temporary, but in the other it muſt neceſſarily, to a certain degree, remain permanent.

In moſt inſtances the venereal ſore throat does not go deeper than the ſoft parts; producing ſores, ſuch as I have deſcribed, of various degrees of magnitude; but where the diſeaſe has either been too long neglected, or where mercury and other remedies employed for it do not prove ſucceſsful, the bones themſelves come in ſome caſes to ſuffer. I have known the body of the upper vertebræ of the neck affected in this manner, and it not unfrequently attacks the bones of the palate and back part of the noſe.

One of the moſt diſtreſsful circumſtances which practitioners meet with in diſeaſes of the throat is, the uncertainty of diſtinguiſhing between venereal affections of theſe parts and others which reſemble them, by which a good deal of time is either altogether loſt, or employed with much

much doubt and undecifion. From this caufe alone ulcers are fometimes allowed to fpread, where it might eafily have been prevented by a timeous ufe of mercury; and in other inftances patients are put upon the ufe of this remedy where it ought by no means to be employed.

The complaints moft apt to be miftaken for venereal affections of thefe parts are, thofe ulcers which occafionally fucceed to long continued cafes of catarrhal inflammation, and fuch as fometimes take place as the confequence of too much mercury having been ufed, or of the patient being expofed to cold while under a courfe of mercury.

The chief means of diftinction between venereal ulcers of the throat and fuch as fucceed to inflammation are thefe; ulcers from inflammation very commonly fupervene upon abfceffes; they are ufually clean, and of a florid red appearance, and accompanied with a good deal of pain. The venereal ulcer again feldom or never produces abfcefs, and in the firft place it

always forms upon the ſurface. It is never clean till remedies have been employed for rendering it ſo; and although it is always accompanied with ſome uneaſineſs, the pain attending it is never ſo ſevere as in the other. I may alſo remark, that in the common inflammatory ſore throat the contiguous parts do not uſually aſſume that eryſipelatous colour which very univerſally takes place in venereal ulcers, nor are they apt to induce that plentiful ſecretion of acrid mucus, and the ſymptoms which enſue from it, which we have ſhewn to be frequent conſequences of the other.

We ſhall hereafter have occaſion to ſpeak more particularly of that variety of ſore throat ariſing from the effects of cold when under mercury, as well as from an over-quantity of mercury having been employed. At preſent I may remark, that this is diſtinguiſhed from the venereal ſore throat by a very conſiderable fullneſs or ſwelling, not only in both amygdalæ of the throat, but over the whole fauces, together with ſome degree of tumefaction

of

of the parotid gland, as well as of all the ſalivary glands; circumſtances by no means connected with venereal affections of theſe parts. The parts are not ſo apt to ulcerate as in the venereal diſeaſe, and any ſloughy appearance which takes place upon them, inſtead of being of a buffy colour, as happens in the other, is white and milky, ſomewhat reſembling thoſe apthous cruſts ſo frequently met with in the mouths of new-born infants. Theſe ſloughs too are more extenſive than they ever are in venereal ſore throats. In the latter they are always confined to ſuch parts as are inflamed, while, in the other, they commonly extend a conſiderable way over the contiguous parts.

The natural unequalities on the ſurface of the amygdalæ, have, in ſome inſtances, when in a ſtate of inflammation, been miſtaken for venereal ulcers; this, however, may always be avoided, and never can happen but from ignorance or inattention.

§ 5. *Of Venereal Ulcers in the Noſe and Mouth.*

Chancres, or primary venereal ulcers, ariſe occaſionally, as we have already had occaſion to remark, both in the noſe and mouth; but ſores of this deſcription, wherever they are ſeated, having been already deſcribed in § 2. of this ſection, we are now to treat of thoſe only which originate from the ſyſtem being infected.

Next to the throat the matter of this diſeaſe fixes moſt frequently upon the noſe, which, ſo far as I have had opportunities of obſerving, is more apt to be attacked with it than the mouth. I need ſcarcely obſerve, however, that ſome variety occurs in this. In a few caſes the mouth is attacked before either the noſe or throat. In others the diſeaſe appears firſt in the noſe; but in a great proportion of caſes it follows the progreſs I am now deſcribing; after having for ſome time fixed up-

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on the throat it goes to the nose, if the disease is not stopped in its course by a proper use of mercury. We may also remark, that although the ulcers in the throat should be cured by mercury, if a sufficient quantity of the medicine be not employed for eradicating the virus, the disease, when it again breaks out, will appear most readily upon the nose, in the same manner as if no mercury had been made use of. This, however, is not universally the case; for in many instances we find it most apt to return to the parts where it was last seated, and after again fixing upon the throat it proceeds to the nose, as it would have done at first if no interruption had been given to it.

It does not however attack every part of the nose indiscriminately. Some have remarked that the matter of this disease has a particular tendency to fix upon the external parts of the body, that this always happens in the first instance, and when it proceeds from these to such as are more deeply seated that it does so with some

regularity, by attacking ſuch parts firſt as are moſt thinly covered. This, however, does not happen with any kind of regularity, and ſeems only to have been noticed for the purpoſe of ſupporting an opinion. Inſtead of going firſt to the ſkin, which it would do were this opinion well founded, the throat, as we have juſt ſeen, is moſt apt to be affected; and when it afterwards attacks the noſe and mouth, it is not even the moſt external parts of theſe that are firſt apt to ſuffer.

In a few inſtances the diſeaſe no doubt appears firſt upon the outward parts of the noſe, but in by much the greateſt number the more internal parts are previouſly affected. The patient at firſt complains of a troubleſome ſtoppage in one of his noſtrils, accompanied with ſome degree of tenderneſs and pain at a particular point. This is often ſo deeply ſeated in the noſtril that it cannot be ſeen, being moſt frequently upon ſome part of one of the oſſa ſpongioſa; but when the under part of the paſſage is affected, together with a fullneſs

nefs of the membrane of the nofe, a fmall foul ulcer is perceived, which is either covered with a white flough, or a firm brown cruft, and on this being removed, although the parts beneath may appear clean and red, they foon become equally foul and floughy as before.

In the commencement of thefe affections, the difcharge is commonly inconfiderable; but on a longer continuance, the matter forms in greater quantities, when it ufually becomes thin and very fœtid. If the ulcer is feated upon any part of the offa fpongiofa, the bone foon becomes difeafed, and the matter acquires a black dirty colour; it becomes larger in quantity, and the fœtor ftill more confiderable than at firft. In this ftage of the difeafe large portions of thefe bones are apt to feparate and come away; but before coming this length, other fymptoms have commonly made their appearance. A weeping eye, as it is termed, or a conftant flow of tears over the cheek, frequently occurs in this ftage of the difeafe,

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owing to the under end of the lachrymal duct, which terminates behind the os ſpongioſum inferius, being apt to be ſtopped by the diſeaſe of this bone. The ſenſe of ſmelling becomes impaired, and in ſome is entirely deſtroyed; and the figure of the noſe is at laſt affected, in the firſt place becoming ſwelled, red, and painful, upon the parts immediately above thoſe that are ulcerated, and afterwards loſing its prominency by the bones of which it is formed coming away. This does not happen while the diſeaſe is confined to the ſpongy bones of the noſe, but the ſeptum itſelf becomes affected, in which caſe there is always much hazard of the face being disfigured by this bone giving way, when the noſe is apt to fall nearly or entirely flat.

This is the uſual courſe of ulcers in the noſe; but inſtead of attacking the internal parts in the firſt inſtance, we meet with them occaſionally upon the cartilaginous parts of the noſe, in which caſe they commonly begin with ſome degree of

of inflammation of the ſkin. After the ſkin has remained red and tender for ſome time, ſmall ulcerations appear upon it, and theſe at laſt running together, a ſore of more or leſs extent is formed by the whole. Like all other venereal ſores, ulcers in this ſituation are always foul; the matter they diſcharge is thin and offenſive, and the ſkin for ſome way round their edges is of an eryſipelatous red colour. When the cartilaginous ſubſtance of the noſe becomes affected, they often put on a cancerous appearance; nor has mercury the effect of ſtopping their progreſs ſo readily here as in other parts of the body: This has in ſome inſtances been the cauſe of venereal ulcers in this part being treated as cancers, by which, even after being extirpated, the diſeaſe has again returned, when a cure might eaſily have been accompliſhed by the mercury having been continued for a due length of time at firſt.

Every part of the mouth is occaſionally the ſeat of venereal ulcers; but although they

they appear from time to time on the infide of the cheeks and on the gums, they are moft frequent upon the palate and on the tongue. In other parts of the mouth the ulcers appear without any previous warning, being for the moft part fully formed as foon as the part affected is examined by the patient, and which is commonly done foon after it begins to excite any uneafinefs; but in the palate no ulceration takes place till the parts have been inflamed for fome time. A deep copper-coloured fpot is at firft perceived fomewhere between the uvula and middle of the palate. This at laft becomes ulcerated; and it is worthy of remark, that in no part of the body do venereal fores advance with fuch rapidity as they do here. In this refpect they are different even from venereal fores in the throat. Thefe laft, as we have already had occafion to remark, feldom proceed to any great depth, nor do they advance with much quicknefs; but here their progrefs is not only rapid but they go at once to

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the full depth of all the ſoft parts covering the bones, and in moſt inſtances ſoon do much injury to the bones themſelves. I have known the bones of the palate become diſeaſed in the courſe of a few days from the firſt appearance of ulceration; and it is by no means uncommon to find a great part of the velum pendulum palati deſtroyed in the ſpace of a few days from the time that it was firſt perceived to be affected.

Venereal ulcers of theſe parts have at times been miſtaken for, and treated as ulcers of a very different kind, but with due attention this may perhaps in every inſtance be prevented. We are more apt to fall into the error of treating other ſores as venereal.

Both in the mouth and noſe venereal ulcers have been miſtaken for cancerous ſores; and in the noſe they ſometimes bear a reſemblance to herpetic affections. From both of theſe we diſtinguiſh them not only by the hiſtory of each particular caſe but by the different appearances

which

which theſe affections actually aſſume. Where a patient with herpetic eruptions on other parts of his body is attacked with ſores of a ſimilar nature upon his noſe or lips, there will be reaſon to conclude that they originate from the ſame cauſe; but where this is not the caſe, and particularly when it is found that the patient either labours under Lues Venerea at the time, or that he was lately affected with it, and not properly cured, this of itſelf will give ground to imagine that they are venereal. Herpetic ſores ſeldom go to a greater depth than the ſkin; whereas venereal ulcers, whether on the noſe or lips, are apt to penetrate deep into the parts upon which they are ſeated.

Cancerous ſores are diſtinguiſhed from theſe, as well as from every other variety of ulcer, by the ſchirous hardneſs in the parts affected with which in every part of the body they are accompanied; and they are particularly diſtinguiſhed from venereal ulcers by the ſmart ſhooting pains which they

they always excite; a ſymptom which does not uſually occur in the others.

The mouth is equally liable with the throat to ſores from an over quantity of mercury, and from patients being expoſed to cold when under the uſe of it. Theſe are more difficult to diſtinguiſh than any others from the real venereal ulcer; for beſides the reſemblance which in ſome circumſtances they bear to them, as they commonly occur while the patient is under cure of ſome ſymptom of ſyphilis, this of itſelf is apt to create ſuſpicion concerning them. Independent of this, the very ſituation of the ſores gives ſome cauſe to ſuppoſe that they may be venereal, ſo that we are readily induced to conſider every ulcer on theſe parts as being of this nature.

Sores ariſing from this effect of mercury, although ſomewhat reſembling the true venereal ulcer, are readily enough diſtinguiſhed from it by whoever has paid attention to this branch of buſineſs. Venereal ulcers are circumſcribed, and in the

the mouth, whether upon the inſide of the lips, cheeks, gums, or tongue, they are always of a corroding and ſomewhat of a cancerous appearance. There is ſeldom at firſt more than one ſore, which does not, however, continue long ſtationary, for in this ſituation venereal ſores extend quickly. Now ſores ariſing from mercury are always diffuſed, and we commonly find them in different parts of the mouth at the ſame time. Like the firſt appearance of the venereal ulcer in theſe parts, they are always ſuperficial, but they have not that corroding aſpect which the other aſſumes; and although foul and ſloughy, their colour is materially different from thoſe that are venereal. The latter are commonly of a dirty brown colour, in ſome inſtances with a ſlight tinge of yellow; whereas the other has always a whitiſh appearance, as if the patient had newly been drinking milk.

The ſituation of the ſores alſo affords ſome means of diſtinction. Thoſe ariſing from mercury ſeem to be induced

chiefly

chiefly by the pressure of the teeth and gums upon those parts that are more particularly acted upon by the medicine; so that we always find them where the swelling is greatest, and the pressure most considerable: Hence they are most frequent on the sides of the tongue; near to the angles of the jaw; and on the insides of the cheeks; and when they take place in one of these situations, we usually find them prevail over the others. Now the true venereal ulcer attacks one part just as readily as another; seldom at first more than one part at once, and we find it just as frequent upon the upper part of the tongue, and on the under part of the mouth between the tongue and the teeth, where pressure has little or no influence, as in any other part.

With due attention to these appearances, and to the history of the case, no practitioner of observation will ever remain long in doubt; but where any uncertainty takes place, the best method of removing it is to desist entirely from the

uſe of mercury. If the ſores are venereal they will ſoon become worſe, if not, they will ſoon diſappear when the ſwelling and tenderneſs induced by the mercury are gone. I think it proper, however, to remark, that ſores of this kind do not always heal as ſoon as might be expected. In ſome inſtances, the ſwelling of the mouth, produced by mercury, continues for a great length of time. I have known it in a very obvious manner more than two months after any mercury had been exhibited. In ſuch caſes, the ſores proceeding from this cauſe do not readily heal; and where due weight is not allowed to this circumſtance, more mercury is in ſuch a ſituation very often given, by which the conſtitution is not only apt to be injured but the very ſores for which the medicine was preſcribed are rendered worſe. In ſome caſes this no doubt proceeds from inattention or want of experience on the part of the practitioner; but it alſo originates from the fear and anxiety of patients, who, doubting of the real nature

of

of the ſores, and dreading their influence upon the conſtitution, are often ſo impatient, that in a concealed manner they perſevere in the uſe of mercury long after they have been deſired to lay it aſide.

I have inſiſted the more upon this point from a very conſiderable number of caſes having fallen within my own knowledge of the moſt diſtreſsful conſequences being produced by meaſures of an oppoſite nature being perſevered in.

Patients in general are ſo eaſily alarmed with whatever gives the leaſt cauſe to ſuſpect that the virus is not entirely removed, that even the moſt trifling circumſtances, when treated with inattention by practitioners, may be followed with very important conſequences. A ſpoiled tooth, with ſharp ragged edges, is very apt to produce a ſore upon that part of the cheek or tongue to which it is contiguous; and as it takes place in a ſlow imperceptible manner, without exciting pain, and produces a foul ſore, ſomewhat reſembling a venereal ulcer, if the real cauſe of it be

not difcovered and removed, very trouble-fome confequences are apt to enfue from it. From this caufe alone I have known a patient put under a tedious courfe of mercury, which, with very ordinary attention, might have been prevented; for wherever an ulcer forms either on the infide of the cheek, or on the tongue, the ftate of the contiguous teeth fhould be examined; and where any fpiculæ, or inequalities are difcovered, they fhould be completely removed, and due time allowed for the fores afterwards to heal, before any other method of cure is recommended.

§ 6. *Venereal Blotches.*

Next to the parts which we have mentioned, the matter of Lues Venerea is moft apt to fix upon the furface of the body in the form of eruptions, or what are commonly termed blotches. In a few cafes the fkin is affected before either the throat, nofe,

nose, or mouth; but this is by no means frequent.

Every part of the body is liable to these blotches, but they appear more frequently on some parts than on others. The cause of this is difficult to explain, for when the whole system is affected we cannot *a priori* say why one part should more readily be attacked than another, but there is no doubt of the fact. In accounting for this disease fixing most frequently upon the throat, nose, and mouth, some have ingeniously suggested that there is probably some particular attraction between mucus and the matter of this disease, from these parts being plentifully supplied with mucous glands; and mercury being particularly apt to affect these parts, while we know that mercury in every form very readily combines with mucus, a theory has been built upon this to account for the action of mercury in the cure of the disease. Admitting the opinion to be well founded, but which does not appear to be the case, still it would not

account for the matter of this diſeaſe being particularly apt to fix upon the ſkin, perioſteum, and bones, parts which are leſs plentifully ſupplied with mucous glands than any others of the body. Neither does the idea hold good here which we have already had occaſion to notice, and which ſome have endeavoured to ſupport, of the matter of this diſeaſe having a particular attraction for parts that are moſt expoſed to the atmoſphere. In the riſe and progreſs of the venereal eruption the reverſe of this appears to be the caſe.

I have obſerved above, that every part of the body is liable to be attacked with theſe blotches; but we find from daily obſervation, that they appear both more frequently and more early in the diſeaſe, on ſuch parts as are kept well covered than on thoſe that are not covered at all. We no doubt meet with them both on the face and hands; but for one inſtance of this we have eight or ten of their appearing upon the breaſt and arms; and next to theſe, they attack in ſucceſſion, and with

ſome

ſome regularity, the ſhoulders, thighs, legs, feet, and hands. Of theſe laſt the extremities of the toes are often the parts firſt affected, particularly the parts lying beneath and round the nails.

Eruptions of this kind excite no pain: A ſlight degree of itchy uneaſineſs is the firſt ſenſation which they produce. When examined in this ſtate, they are found to conſiſt of a number of ſmall diſtinct blotches, ſcarcely riſing above the ſurface of the ſurrounding parts, and ſeldom exceeding the ſize of a ſixpence. They are of a pale red colour, and when ſmartly rubbed the cuticle falls off in the form of fine bran, leaving the ſkin beneath ſomewhat more deeply tinged with red. The ſkin, however, does not appear to be otherwiſe injured; and when the blotches are allowed to diſappear of themſelves, as they commonly do, the ſkin is, for a conſiderable time, found to be perfectly ſound, and not even altered in colour.

But although eruptions of this kind diſappear from time to time, no advantage

is gained by this; they either proceed from one part to another, or they attack the ſame parts with more violence. In returning upon parts where they have been before, the cuticle is more elevated from the ſkin beneath; and on being removed, the ſkin itſelf is found to be either ſomewhat inflamed or in a ſtate of tenderneſs approaching to ulceration. The ſkin not being in a ſtate fit for producing cuticle, a ſcab or cruſt now forms upon theſe tender parts. In the courſe of a few days matter forms beneath, which for ſome time oozes out at the ſides, till the cruſt ſeparating and falling off, the foundation is thus formed of the true venereal ulcer, of which a deſcription will afterwards be given.

In ſome caſes theſe red, or rather mottled blotches, inſtead of proceeding to the ſtate of ulcer in the manner I have juſt deſcribed, are all covered over with an infinite number of very ſmall pimples, each of which contains matter; and from theſe running together, a cruſt is formed, which

which likewiſe falls off at laſt, and leaves the parts in a ſtate of ulceration.

When blotches take place among the hair, which they frequently do, as they do not in their firſt ſtage riſe much above the level of the ſurrounding parts, and as they never in this ſtate create much uneaſineſs, they are ſeldom perceived till a ſcab or cruſt begins to form, and as the matter on oozing out gets matted into flakes with the hair, we are longer in this ſituation than in other parts of the body, of getting a view of the parts beneath, which, on the cruſt falling off, are always in a ſtate of ulceration, forming what is commonly termed the corona veneris.

In the palms of the hands and ſoles of the feet the firmneſs of the ſkin prevents theſe blotches from appearing ſo obviouſly as in other parts. The cuticle is here either ſeparated in broad flakes, early in the diſeaſe, or if it is ſo firm as to confine the matter for a conſiderable time, it at laſt burſts out, when the parts beneath are found to be ulcerated.

It

It is chiefly in this eruptive ſtate of the diſeaſe that it attacks the nails of the fingers and toes. The cuticle which ſurrounds them is perceived to be red and tender; the parts below the nails alſo become red, and the nails at laſt become looſe, and fall off.

The complaints moſt ſimilar to venereal blotches, and with which they have frequently been confounded, are all the variety of herpetic eruptions, particularly ſuch as are dry, and do not yield matter. There is one remarkable difference between them in the nature of the matter which they afford. The matter of the true venereal eruption is ſo tough and viſcid that it does not crack, and commonly remains upon the parts perfectly entire, till it ſeparates and comes away; whereas in herpes, although the matter is in one variety of the diſeaſe of a viſcid glutinous nature, it does not form into flakes, as it very univerſally does in Lues Venerea. It ſometimes forms into cruſts, but theſe break and come away in ſmall pieces.

In

In herpes the eruption appears moſt frequently in the form of a circle, and the parts which it ſurrounds appear to be ſound: Hence by the common people it is uſually termed ring-worm. Theſe circles or rings are of every variety of ſize, but they are ſeldom leſs than a half-crown piece. Now the venereal blotch is not often larger than a ſixpence, and never exceeds the ſize of a ſhilling; and the whole ſkin of the parts affected appears to be nearly in an equal degree of diſeaſe. The mottled appearance which they aſſume gives cauſe indeed to ſuppoſe that ſome parts of the ſkin remain ſound; but on examination with a magnifying glaſs, the whole is found to be more or leſs diſeaſed. Whereas in the herpes, the parts ſurrounded with the ring are equally ſound with any part of the body.

In judging of this point we derive no ſmall aſſiſtance from attending to the ſituation of the eruption, as well as from the hiſtory of its riſe and progreſs. We have had occaſion to obſerve that the ve-

nereal

nereal eruption appears moſt frequently at firſt upon the breaſt and arms. Indeed this very commonly happens; whereas in herpes it is moſt frequent upon the under part of the abdomen, and about the hands and wriſts.

When to all theſe circumſtances we add, that in the venereal eruption there is commonly much cauſe for ſuſpicion, from the patient's courſe of life, and perhaps even from the exiſtence at the time of ſome other ſymptoms of the diſeaſe, and that in herpes we often find that the patient has either at ſome former period been liable to eruptions of a ſimilar nature, or that they have prevailed in his family, ſcarcely any cauſe for doubt will remain.

Herpetic eruptions and venereal blotches ſometimes occur in the ſame perſon at the ſame time. In this caſe it may be difficult, or perhaps impoſſible to diſtinguiſh them; but no great inconvenience can ariſe from this, for the exiſtence of the venereal affection being aſcertained, this,

as

as being the moſt important of the two, muſt have the ſpecific remedy employed for removing it, and if the other eruption continues after the venereal blotches are carried off, proper remedies muſt afterwards be employed for it.

I know no other eruption that may not be eaſily diſtinguiſhed from veneral blotches.

§ 7. *Of Venereal Ulcers.*

In § 2. of this ſection I have already given a deſcription of chancres, or ulcers produced by the local application of the venereal virus. It is thoſe ulcers we are now to conſider which take place in more advanced ſtages of the diſeaſe, and which evidently proceed from the virus having entered the ſyſtem. In §. 4 and 5. venereal ulcers of the throat, noſe, and mouth, have been deſcribed, but ulcers from the ſame cauſe appear occaſionally in almoſt every part of the body.

But

But although no part of the body is perhaps entirely exempted from theſe ulcers, I mean no external part of it, yet ſome parts are much more liable to be attacked with them than others; and it is a fact worthy of remark, that there is no part of the ſurface of the body on which they do not occur more frequently than on the genitals. Indeed venereal ulcers of theſe parts, from infection of the conſtitution, is an occurrence which ſeldom falls within our obſervation. Almoſt every ulcer on the genitals may be traced to a local application of the virus.

We have already had occaſion to obſerve that venereal blotches are apt to terminate in ulcers. Hence the venereal ulcer is moſt frequent on theſe parts that are attacked with theſe eruptions, particularly the breaſt, ſhoulders, and arms. We often meet with them among the hair, and between the fingers and toes. In the latter ſtages of the diſeaſe indeed, I have met with them more frequently upon the ſides of the toes than on any other part.

For

For the moſt part the venereal ulcer is preceded either by blotches, ſuch as we have juſt deſcribed, or by a number of very ſmall pimples; but I have met with ſome inſtances of a part becoming ulcerated without either of theſe appearances going before it. A ſlight degree of itchyneſs prevails for ſome days, and the part is ſcarcely obſerved to be diſcoloured before an ulcer is perceived.

In whatever manner a venereal ulcer may form, the appearances which it afterwards exhibits are nearly the ſame. A conſiderable deſtruction of parts ſoon takes place; more quickly indeed than uſually happens from any other cauſe except mortification. Inſtead of proceeding gradually from the ſurface downwards, as other ulcers do, a certain portion of the ſoft parts between the affected ſpot of the ſkin and bone beneath ſeem to be contaminated at once; for almoſt as ſoon as the ſkin becomes evidently ulcerated, the correſponding parts beneath not only appear to be diſeaſed, but are ſoon thrown ſo entirely out

that

that ſcarcely any thing but the perioſteum is left to cover the bone.

The ſides and bottom of venereal ulcers of every deſcription are at firſt always foul; but while chancres and all recent ulcers are uſually white and ſloughy, ſores proceeding from diſeaſes of the conſtitution are of a dirty brown appearance. The matter which they diſcharge is ſometimes thin, and ſo acrid as to deſtroy the contiguous parts, but for the moſt part it is more tough and adheſive than good pus. It has often a ſingularly green colour, particularly in ulcers on that part of the head covered with hair, and it is always of a very diſagreeable fœtid ſmell.

Theſe ulcers are ſeldom accompanied with much pain; for although the ſkin which ſurrounds them has always a tender appearance, being in almoſt every inſtance of an eryſipelatous red colour, they can bear to be handled more eaſily than ſores of any other kind of equal extent. The parts, in ſome caſes indeed, ſeem to be deprived of their natural ſenſibility;

and I have in ſuch inſtances found that one of the firſt effects of the mercury preſcribed for the cure has been to render them more irritable.

Venereal ulcers ariſing from diſeaſe in the conſtitution differ from all ſuch as are local in our not being able to render them clean or bring them to a healing ſtate by any external application that we can employ. Where any doubt exiſts of the cauſe, they are often treated with local remedies; but no advantage is derived from them. Even the moſt powerful detergents have no influence. The parts ſtill remain foul. The matter continues to increaſe in acrimony; and if a courſe of mercury is not preſcribed, or if not given in ſufficient quantity, the ſores not only become more extenſive, but more numerous, by parts taking on a diſpoſition to ulcerate which did not previouſly bear any mark of diſeaſe.

The deſcription which I have given of the venereal ulcer comprehends all the ordinary appearances of theſe ſores; but ſome difference is produced in them by a varie-

ty of caufes; by the nature of the parts in which they are feated; by the conftitution being found or affected with other difeafes; and by the effects of fuch remedies as may have been employed without being fufficiently powerful to accomplifh a cure.

In a great proportion of cafes the venereal ulcer is feated in the fkin and cellular membrane. In the firft inftance, indeed, thefe are the only parts that are affected; but in more advanced periods of the difeafe, we find the virus fixing upon the tendons, fafciæ of the mufcles, periofteum, and bones. The parts leaft liable to be attacked with it are the glands, particularly thofe of the lymphatic fyftem, but occafionally even they are affected with it. Now we may eafily fuppofe, that the ordinary appearance of the difeafe, that which it exhibits when feated in the cellular fubftance, will be materially different from that which takes place from it in the tendons, fafciæ, glands, or bones. It is difficult, however, and perhaps impoffible, to

give

give any adequate defcription of the different appearances which occur in thefe ulcers thus differently fituated. It is from experience alone that a knowledge of this can be obtained.

The appearances of venereal ulcers are more or lefs affected by every difeafe which the fyftem may at the time labour under. Some indeed have contended that no two difeafes can exift in the conftitution at the fame time. This remark, however, is certainly ill-founded. From daily obfervation, we find, not only that the *fyftem* may be affected with different difeafes at the fame time, but that two difeafes may at the fame time fix upon the fame part. Of the firft we have inftances without end. It happens in the combination of fever with every variety of general cachexy, fuch as dropfy, jaundice, &c. of fmall-pox with fcrophula, and fcrophula with fcurvy; all of which are often met with, exifting, and making progrefs in the fame perfon at the fame time, and of local complaints combining in the fame part, a

variety of inſtances might alſo be mentioned. I have at preſent a perſon who had long been liable to piles, who ſome time ago was attacked with condylomatous excreſcences about the anus from a venereal taint; to theſe ſucceeded a common abſceſs from inflammation, and laſt of all the parts have become cancerous. As all of theſe are obviouſly in exiſtence at this moment upon the ſame parts, and as inſtances of other combinations of local diſeaſes are occurring daily, it is with ſurpriſe and aſtoniſhment that I find much labour and ingenuity employed to prove that this connection of diſeaſes never takes place, and in a work too which does the higheſt credit to the author.

The opinion which the author of that work endeavours to eſtabliſh, is indeed ſo contrary to the obſervation of all who have paid attention to the ſubject, that I ſhould not have judged it neceſſary to take notice of it, were it not with a view of preventing the unexperienced from being miſled by it; for were it to be received as a ge-

a general principle, it would in a variety of circumſtances have no ſmall influence on practice, and would often, I am afraid, be productive of diſtreſs and diſappointment both to patients and practitioners *.

If this opinion was well founded, every ulcer of the venereal kind ariſing from diſeaſe of the conſtitution ſhould yield to mercury alone: Inſtead of which, do we not daily meet with ſores of this kind, in which mercury by itſelf fails entirely, and in which, from the conſtitution being at the ſame time infected with ſcrophula, or ſome other diſeaſe, bark and other remedies muſt be employed before any progreſs towards a cure can be obtained? This combination of Lues Venerea with other diſeaſes, particularly with ſcrophula and ſcurvy, is indeed, I apprehend, the moſt frequent obſtacle which we meet with in the cure of almoſt every ſymptom of this diſeaſe. Buboes, as well as ulcers, are always particularly obſtinate

* The publication to which I allude is Mr. Hunter's Treatiſe on the Venereal Diſeaſe.

where ſcrophula prevails; and the ſlighteſt tendeney to ſcurvy puts it out of our power to employ mercury in ſuch quantities as the cure of venereal ulcers often requires. The effects of this are chiefly perceived at ſea, where a patient with Lues Venerea is ſure to have all the ſymptoms aggravated, particularly ſuch ulcers as may prevail, on his being attacked with ſcurvy. The ulcers not only put on a worſe appearance, but till the ſcorbutic affection is removed, the farther uſe of mercury is for the moſt part laid aſide.

The deſcription of the venereal ulcer which I have given above relates to the diſeaſe in its more early ſtages, and where no mercury has been employed. When mercury is preſcribed, and has entered the ſyſtem, ſores of this deſcription ſoon put on a healing appearance; and if the medicine is continued, the cure uſually goes on without interruption. But if, inſtead of being long enough perſiſted in, the mercury is laid aſide before the virus

rus is eradicated, an effect results from it which could not *a priori* be expected. This partial effect of mercury not only gives a different appearance to venereal sores, but commonly renders them more obstinate. If the sores have healed, and again break out, although they will not go to such a depth as they did in the first process of ulceration, they will spread farther, and become more numerous. By this imperfect application of mercury, a disposition seems to be formed, not only in the parts contiguous to the old sores, but in almost all the soft parts of the body, to go readily into a state of ulceration; and although the new sores which take place do not go deeper than the cellular membrane, they daily become more numerous, insomuch that the parts in which they are chiefly seated are apt to acquire a honey-comb appearance.

But although these newly-formed ulcers seldom penetrate to such a depth as those to which they succeeded, they assume every other appearance of the true

venereal ulcer. They are foul and ſomewhat ſpongy: They are not attended with much pain, and the ſurrounding ſkin has an eryſipelatous, or copper-colour complexion. In the courſe of my experience, however, they have always proved to be of more difficult management than the others; nor does mercury act with ſuch certainty in removing them. The ſame ſores either continue obſtinately to reſiſt the effect of this remedy, or, if theſe heal, others break out, and thus ſpread over a very conſiderable extent of ſurface, giving all the appearances of the phagadenic or depaſcent ulcer of different authors.

Hitherto I have been ſuppoſing that the diſeaſe is confined to the ſoft parts of the body; but where the ulcers, as now deſcribed, have been neglected, or where the remedies employed for removing them have not proved effectual, they are apt to affect both the bones and tendons; and where ſores take place upon any of theſe parts, their appearances are materially different from the common venereal ulcer. The parts affected, inſtead of being corroded,

ed, and hollowed out in the form of a cup, as they uſually are in the venereal ulcer, are filled with a ſoft fungous ſubſtance, of an unhealthy complexion, which bleeds freely on being injured, and which always returns ſoon on being deſtroyed with eſcharrotics. The diſcharge of theſe ulcers, when ſeated upon carious bones, is thin, and of a brown colour, and ſtill more fœtid than the ordinary diſcharge of venereal ulcers in the ſofter parts of the body. When the ſurface of a tendon becomes ulcerated the parts are not only ſoft and ſpongy, but more foul or ſloughy than ſores of almoſt any other kind.

There is another variety of venereal ulcer of which it is proper to take notice, I mean that which ſucceeds to the burſting of a bubo. Seated in the body of a gland, this kind of ſore has a very different appearance from the common venereal ulcer, which attacks, as we have juſt ſeen, the ſkin and cellular ſubſtance only. Buboes are always accompanied with pain and inflammation: Hence when matter forms in them, it is of the purulent kind.

But

But although the common venereal ſore is always attended with ſome degree of redneſs, as this is not of the true inflammatory kind, being evidently eryſipelatous, and which we find from experience never produces purulent matter, the diſcharge accordingly is different. But although the matter of buboes is always more or leſs purulent at firſt, it uſually becomes thin and acrid at laſt, owing to ſores of this deſcription, on the farther continuance of the diſeaſe, being apt to become eryſipelatous. Beſides this change which takes place in the nature of the matter, the parts in which it was collected, although at firſt they have all the appearances of a common abſceſs, at laſt become foul and ſpongy; the edges of the ſore become callous; and a much greater degree of pain takes place than almoſt ever accompanies the ordinary form of the true venereal ulcer.

But although the ſore which ſucceeds to a bubo is neceſſarily at firſt always in the body of a gland, we find at laſt that it

it is apt to ſpread and affect the contiguous parts. The matter pervading the cellular ſubſtance ſinuſes form; and the ſkin becoming inflamed, the foundation is thus laid for the formation of other ſores. In this manner the ulcers which ſucceed buboes frequently ſpread to a great extent, one part either breaking out as another heals, or perhaps the whole continuing open, ſo as to leave all the upper part of the thigh, and in ſome caſes, the under part of the abdomen, covered with ſmall ſores.

No part of the treatment of Lues Venerea gives more diſtreſs to patients, or more perplexity to practitioners, than the management of this ulcerated ſtate of buboes, which, beſides being accompanied with much pain, is often one of the moſt obſtinate ſymptoms of the diſeaſe. Inſtead of yielding to the uſe of mercury, ſores of this deſcription become often more obſtinate after mercury has been employed; fever is apt to take place; and where the conſtitution is not very robuſt, they

they even ſometimes end in the death of the patient.

This great degree of inveteracy in theſe ſores may originate from different cauſes; but I have commonly found that it takes place in ſcrophulous conſtitutions, and in ſuch as are particularly delicate. It may alſo be remarked, that among our common people ſores of this kind are ſtill more particularly obſtinate in ſuch as are under the neceſſity of living in damp ſituations, as is uſually the caſe with weavers.

§ 8. *Of Nodes, and other Swellings of the Perioſteum, Bones, and Tendons.*

A node is a hard circumſcribed tumour, proceeding from a bone becoming affected with the venereal virus. The perioſteum, tendons, ligaments, and even faſciæ of the muſcles, are alſo liable to be attacked with the matter of this diſeaſe.

The

The venereal virus, however, does not readily attack theſe harder parts of the body. In a great proportion of caſes it remains long in the habit before they become affected, and when tumours appear upon them, it is often at ſuch a diſtant period from the exiſtence of any other ſymptom of Lues Venerea, that both the patient and practitioner are apt to be deceived, and to conclude that they proceed from ſome other cauſe: Hence pains and ſwellings occuring in this diſeaſe are often treated as rhumatic affections, in conſequence of which remedies are preſcribed from which no advantage is derived; while mercury, from which alone relief could be obtained, is entirely overlooked. But although the true venereal node never takes place early in the diſeaſe, I mean ſuch ſwellings as are of an oſſeous nature, and originate from the bones, yet the perioſteum and tendons, as well as the faſciæ of muſcles, are in ſome inſtances very early affected. This I have known to happen almoſt as ſoon as there

was

was cause to suspect that the virus had entered the system. In such cases, however, some obvious reason could always be given for this variation in the course of the disease, by which the virus was made to fix upon these parts in preference to others, which usually are first affected. In all of them the patients were found to have been much exposed to the effects of cold and dampness, which I have had many opportunities of observing to have an evident influence in exciting the virus of this disease to fix early upon these parts. Soldiers infected with Lues Venerea, when exposed to the cold and dampness to which they are usually liable during encampments, are particularly apt to suffer with swellings of this kind.

Although it is of much importance to distinguish between such of these affections as arise from the bone, and those which proceed from the periosteum, tendons, and muscular fasciæ, yet this has not commonly been done with sufficient accuracy. They have all been considered as nodes, and blended

blended under one general defcription, by which a good deal of perplexity has been introduced in the method of cure.

Nodes may appear upon every bone of the body, but they are moft frequent where the bones are thinly covered with mufcles: Hence they are moft commonly met with upon the forehead, upon the forepart of the tibia, and on fome parts of the radius and ulna. We alfo meet with them on the bones of the hands and feet. I never, however, faw them on the fingers or toes, but I have obferved them upon the fternum and ribs. In two inftances, where the patients died of other difeafes after being cured of Lues Venerea, and in whom fevere pains had occurred in the middle of the thighs, nodes or exoftofes upon the femur were difcovered. In one there were two fmall knobs or protuberances, in the other there were upwards of twenty, and all of them upon the anterior part of the bone.

Thefe offeous tumours do not produce any alteration in the colour of the fkin, unlefs

unleſs they arrive at a much larger ſize than is uſual. Their firſt approach is diſtinguiſhed by a ſlight degree of uneaſineſs in the parts affected. This excites the patient's attention, when on examination a ſmall hard tubercle or protuberance is diſcovered. This in a gradual manner becomes larger; and, while it increaſes in ſize, it alſo becomes more painful. By the time that it has acquired the bulk of half an ordinary walnut, and few nodes I believe are ever larger than this, the ſkin has commonly become red and tender; and ulceration at laſt taking place, the bone on being thus denuded, is not only found to be ſwelled but completely carious.

This is perhaps one of the moſt painful ſymptoms of Lues Venerea; for although the pain is at firſt always moderate, it never fails to become ſevere on the tumour advancing in ſize. This does not depend ſo much, however, on any alteration produced in the bone itſelf, as on the diſtenſion of the perioſteum, which the tumour of the bone neceſſarily occaſions; a circumſtance

cumſtance of which we are rendered certain by the pain ceaſing entirely on the protuberance of the bone being laid bare, either by an inciſion, or by the ſoft parts which cover it being deſtroyed by ulceraration.

This deſcription of a node, it is proper to remark, comprehends the full progreſs of this kind of tumour to its laſt and ultimate ſtage; a termination we ſeldom meet with, if it be not among the poor and deſtitute. Mercury is commonly preſcribed as ſoon as the nature of the tumour becomes obvious, and as this puts a ſtop to its farther increaſe, it is by great inattention or miſmanagement only that the ſurrounding ſoft parts are ever allowed to ulcerate. When ulceration does take place, the parts ſoon aſſume all the appearances of the true venereal ulcer of which we have already given a deſcription.

The ſame bones upon which nodes moſt frequently take place are liable to tumours of a different kind, which, from their bearing a reſemblance to nodes, have impro-

perly been diſtinguiſhed by the ſame appellation. By ſome, indeed, all tumours upon theſe parts, as well as ſuch as occur in this diſeaſe upon the tendons, ligaments, and faſciæ of the muſcles, are conſidered as nodes. This proceeds from the confuſed manner in which theſe ſymptoms were deſcribed by the firſt authors who wrote upon this ſubject, by which others who have not paid particular attention to it have uniformly been miſled. It requires, however, no nice diſcrimination to perceive that the tumours to which theſe parts are liable from Lues Venerea are materially different in their formation, and requiring alſo a difference of treatment it becomes an object of no ſmall importance to have this pointed out.

The tumours which moſt reſemble nodes are produced by an effuſion of a ſmall quantity of matter between the perioſteum and bone. This ſeems to proceed from the internal ſurface of the perioſteum becoming ſlightly inflamed, by which a few drops of a colourleſs fluid are poured

out

out upon the ſurface of the bone. If not prevented by an early exhibition of mercury, the tumour, which was at firſt ſo ſmall as to be with difficulty perceived, becomes gradually larger, and from being hard and colourleſs, it becomes ſoft and inflamed. Even when of the greateſt bulk, however, at which it commonly arrives, this tumour does not exceed the ſize of the real node; for the perioſteum not being capable of much diſtenſion, it either ſoon burſts, or the tumour becoming very painful, relief is obtained by making an inciſion into it.

Theſe tumours, although at firſt always hard, are by no means ſo firm as nodes. This, even in their commencement, ſerves as a ſufficient mark of diſtinction between them; and where matter is formed, as the tumour is thinly covered, a fluctuation is ſoon perceived, by which, in the progreſs of the complaint, it is clearly and evidently diſtinguiſhed from nodes, which always remain hard to the laſt.

When tumours of this defcription either burft or are laid open, although the bone may be found to be rough and carious, no fwelling is difcovered; and on the ulcer healing by the means to be hereafter mentioned, the parts appear to be reduced to the level of the furrounding fkin; whereas in real nodes, the tumour of the bone remains nearly, or perhaps entirely of the fame fize during the life of the patient, nor has mercury, or any external application, any effect in reducing it. Some indeed entertain a different opinion, but where venereal tumours upon the bones have been removed by mercury, I have much reafon to think that they have not been real nodes, but merely thofe fmall tumours produced by effufion which we have juft been confidering. At leaft this has happened in different cafes in which I have been concerned, where tumours, which at firft were fuppofed to be formed of bone, appeared afterwards to proceed entirely from effufion; and I have not met with a fingle inftance of a tumour evidently offeous being

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ever carried off by mercury, or any other medicine.

Besides the tumours we have described, there is still another, by some also improperly termed a node, with which the parts covering the hard bones are not unfrequently attacked in Lues Venerea. This variety of tumour occurs more early in the disease than nodes, and proceeds most frequently as I have observed above, from exposure to cold and dampness. It is also distinguished from nodes from its taking place in various parts of the body at once.

The patient at first complains of pains over the whole affected limbs; but he soon finds that one part of each limb is more severely affected than the rest. In the legs this happens about the middle of the tibia and fibula. In the thighs it occurs at the middle of the femur, and in the arms along the whole course of the radius and ulna.

For the most part these pains are considered by the patient as rheumatic; and

I have known many inſtances, even of practitioners being deceived with them. No advantage, however, is obtained from thoſe medicines which uſually give relief in rheumatiſm; and at laſt the parts from whence the pains chiefly proceed are found to be ſwelled. But this ſwelling is very different from that fulneſs of parts which occurs in rheumatiſm; and it differs materially from the latter in the parts which it attacks. The rheumatic ſwelling is chiefly confined to the joints. In very ſevere caſes it no doubt ſtretches over every part of a limb, but it very commonly originates in the joints: Whereas thoſe venereal ſwellings, although they ſometimes ſtretch towards the joints, they very univerſally fix upon thoſe parts of the limb that lie between one joint and another. In rheumatiſm the whole circumference of the limb becomes ſwelled in nearly an equal degree, while in the other the tumour is circumſcribed, being moſt frequently confined to leſs than one half of the circumference of the limb; or when

one limb is affected in different parts, as often happens in the fore-arm between the elbow and wrist, the seat of each tumour can be very distinctly traced. In the venereal swelling of these parts the tumour is firm, and so deeply seated that on a slight examination it is often supposed to proceed from the bone itself, while that swelling which takes place in rheumatism is of a more compressible nature, and appears even on the slightest examination to be altogether free from the bone beneath.

By attention to these circumstances, as well as from the history of the case, we need never be under much difficulty in judging of the nature of these swellings, nor in determining when they are venereal and when of a rheumatic nature. It is a prevailing opinion, that the difference between them is sufficiently marked by the pain in all venereal affections of this kind being particularly severe when the patient is warm in bed, while the contrary is supposed to happen in rheumatism. I have

not found, however, that any dependence can be placed upon this; for both are apt to be very differently affected by the fame caufe in different patients, and even in the fame patients at different times.

This variety of fwelling feems always to originate in the periofteum, and to proceed from fome degree of inflammation, which firft begins in that membrane, and proceeds from it to the furrounding parts. Like every inflammatory affection of membranous parts, it does not readily terminate in fuppuration. I have never known an inftance of matter forming in it: Nor do thofe ferous effufions take place here which are fo frequent in rheumatifm; a circumftance which conftitutes another characteriftic diftinction between the two difeafes; for rheumatifm feldom arrives at a great height without fwellings taking place in the parts chiefly affected, and they feem all to be of the ferous kind.

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Almoſt every author who has written upon Lues Venerea deſcribes affections of the ligaments, tendons, and faſciæ of muſcles, as frequent ſymptoms: This, however, is far from being conſiſtent with my experience; nor do I ſuppoſe that they ever take place but in the moſt advanced ſtages of the diſeaſe.

My own obſervation having led to this concluſion, I was induced to converſe and to correſpond upon the ſubject with others, who from having much employment in this branch of practice I had reaſon to ſuppoſe would be able to give me the beſt account of it. The prepoſſeſſion which they had received from books had prevented them from entertaining a doubt of the frequency of this ſymptom, but none of them had ſeen it ſo often as to be able from his own obſervation to give a diſtinct or well-marked account of it.

Venereal ulcers often penetrate to ligaments, tendons, and other deep-ſeated parts. In this manner every practitioner muſt have ſeen thoſe parts affected with the

virus of this diſeaſe; but in theſe the diſeaſe uniformly begins in the ſkin, and proceeds to the parts beneath. Of ſwellings in the ligaments, tendons, or faſciæ of muſcles from this cauſe I have met with very few inſtances; and even of theſe ſome were of a doubtful nature, as they occurred in ſcrophulous conſtitutions.

Thoſe ſwellings, ſo far as I have had opportunities of obſerving, are not ſo painful as tumours of the perioſteum and bones. They are ſmall and circumſcribed: At firſt hard and colourleſs, and afterwards on the ſkin becoming red, they turn ſoft, and ſoon burſt. The matter which they diſcharge perhaps never partakes of purulency: It is thin, and either nearly colourleſs or ſomewhat tinged with blood. The ſores which enſue are foul, and uſually more difficult of cure than any other that we meet with in this diſeaſe.

I have ſeen different caſes of tumours of a conſiderable ſize, ſeated upon tendons as

well

as upon aponeurotic expanſions, and which were ſuſpected to be venereal. Theſe have commonly been hard, and where they have come to create much uneaſineſs I have had occaſion, in ſome inſtances, to remove them with the ſcalpel. Two of theſe were upon the tendinous part of the biceps; and although in both they had been ſuſpected to be venereal a very deciſive proof was obtained of the contrary, for they were both extirpated, and the ſores healed eaſily without any mercury being given.

§ 9. *Of Venereal Excreſcences about the Anus.*

The parts of generation in both ſexes are liable to be attacked with warty excreſcences in Gonorrhœa, moſt frequently towards the end of the diſeaſe, when the running is nearly gone. In ſome caſes they ſpread over all the contiguous parts, and even reach to the anus; but how-

however extenſively this may happen, excreſcences of this warty nature which occur from Gonorrhœa are always local, as we judge from mercury having no influence in removing them, and from finding that topical remedies are alone to be depended upon for a cure *.

But beſides theſe, the parts about the anus are occaſionally attacked with excreſcences truely venereal, which appear in the latter ſtages of ſyphilis only, and of which we cannot accompliſh a cure by any remedy that is not conjoined with a complete courſe of mercury. They are eaſily removed, either with the ſcalpel or eſcharrotics; but if mercury is not adminiſtered they ſoon return with more virulence than at firſt.

In ſome caſes they appear at the ſame time with venereal blotches in other parts of the body, which in many inſtances they reſemble, being raiſed or

* See Vol. I. Chapter II. Section 13.

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elevated above the contiguous ſurface. Till of late I had not ſeen them but as a ſymptom of ſibbens, and I did not ſuppoſe that they took place in the ordinary form of Lues Venerea. I have now, however, met with a ſufficient number of inſtances to convince me that in this I was miſtaken, and which ſhew that they not only occur along with eruptions in other parts of the body, but that altogether independent of theſe they appear as a diſtinct ſymptom in ſtill more advanced periods of the diſeaſe.

They are not ſo hard as thoſe warts which ſucceed to Gonorrhœa; they are more of a fleſhy nature, more tender, and therefore more apt to bleed. They have a more uniform ſurface; and inſtead of being formed of a number of ſmall warts connected together, as theſe tumours about the anus produced by Gonorrhœa uſually are, we find them compoſed of one uniform maſs.

They do not approach ſo near to the verge of the anus as warty excreſcences

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commonly do, being for the moſt part of the greateſt extent and moſt elevated near to the tuberoſity of the iſchium. In ſome caſes they become ulcerated, and diſcharge a great deal of very offenſive matter; and when this happens in women they appear ſometimes to be productive of buboes; at leaſt in different caſes where buboes occurred in women, no other ſource of infection could be perceived. Why they ſhould not be the cauſe of buboes in men may be difficult to explain; but although I have often met with them in men in a ſtate of obvious ulceration, I never knew buboes to be the conſequence of them. Perhaps in men the lymphatic veſſels of theſe parts do not paſs through any external conglobate glands, and if this is the caſe they cannot produce buboes; for in the hiſtory of buboes we have ſeen that the matter of Lues Venerea does not excite ſwelling or obſtruction in any of the internal glands.

For the moſt part any ulceration which takes place in theſe excreſcences is very ſuper-

ſuperficial, and does not reach beneath the ſurface. In ſome inſtances, however, ſinuſes form in them. In this manner I once knew a fiſtula in ano produced, for which it was neceſſary to perform the uſual operation after the patient was cured of Lues Venerea.

Like other ſymptoms of ſyphilis theſe excreſcences either continue nearly in the ſame ſtate, or become gradually worſe, as long as no remedy is employed for the cure of the diſeaſe in the conſtitution. They never diſappear either entirely or in part by any effort of the ſyſtem; but if by a partial courſe of mercury their progreſs is interrupted, although the virus of the diſeaſe is not completely extinguiſhed, they ſoon become leſs active than they were before; in courſe of time they diſappear altogether, and with whatever violence the diſeaſe may break out in other parts of the body, it does not again excite a recurrence of excreſences. In the latter ſtages of Lues Venerea, when by a long continuance of the diſeaſe the whole

ſyſtem

ſyſtem may be ſuppoſed to be contaminated, we find a variety of ſymptoms exiſting at the ſame time; otherwiſe this, as we have already had oacaſion to obſerve, does not readily happen; nor do we commonly find early in the diſeaſe more than one or two of the ſymptoms ſubſiſting at once.

§ 10. *Of Swellings of the Teſtes.*

INFLAMMATION communicated along the urethra in Gonorrhœa is the moſt frequent cauſe of ſwelling of the teſtes. This has induced many to ſuppoſe, and ſome to aſſert, that this ſymptom is never induced by Lues Venerea; that it is always a local affection, and never produced by any diſeaſe of the conſtitution.

That this is very generally the caſe I will readily admit; for in a great proportion of caſes we can clearly trace the diſeaſe to a local cauſe, and it is moſt eaſily removed by local applications; but this is

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not always the caſe, for I have met with various well-marked inſtances of the teſtes ſwelling from diſeaſe of the ſyſtem alone. Thoſe who doubt the fact will aſk, In what manner can this be aſcertained? By the ſwelling coming on without any external injury; by no Gonorrhœa having preceded; by the patient being known to be infected with Lues Venerea at the time; and by the ſwelling being with eaſe and certainty removed by mercury, while it had daily become worſe as long as thoſe remedies were employed which uſually prove effectual in ſwelling of the teſtes ariſing from Gonorrhœa.

With me theſe circumſtances afford complete conviction, and as I have repeatedly met with them I judge the fact to be clearly eſtabliſhed.

The very firſt approach of this ſwelling exhibits a difference between it and that which proceeds from Gonorrhœa. In this laſt a conſiderable degree of pain prevails from the firſt, and the diſeaſe begins in the epidydimis; but in the ſwelling

from Lues Venerea the patient for a confiderable time feels only a flight uneafinefs, and even on the farther progrefs of the difeafe any pain that takes place is not acute, but dull and obtufe, fuch as might be fuppofed to proceed chiefly from the additional bulk and weight of the teftis. The body of the tefticle is always firft affected; and it is only where the difeafe is neglected, or where the nature of it is miftaken, and mercury judged to be improper, that the fwelling proceeds to the epidydimis.

Thefe circumftances of themfelves might fufficiently diftinguifh the one variety of fwelling from the other; but we alfo obferve that in the fwelling from Gonorrhœa the fcrotum becomes red and painful very early in the difeafe, by the inflammation fpreading from the tefticle; whereas in the other the fcrotum is very feldom affected, and in no inftance till the fwelling has been of long duration. Hence in the one the patient can fcarcely admit of the parts being touched, while in the other little or

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no pain is produced, even when handled with freedom. In the hernia hemoralis, as it is termed, the whole contiguous parts ſeem often to ſympathiſe with the diſeaſe in the teſtis, by the pain ſpreading along the groins, and over all the upper part of the thighs and abdomen; while in the other any uneaſineſs which occurs is either confined entirely to the teſticle or to the courſe of the ſpermatic cord. In this the ſwelling comes ſlowly and gradually to a larger ſize, inſomuch that ſome weeks will paſs before it arrives near to its height; while in the other the tumour is often as large in the courſe of forty-eight hours as it ever becomes.

Thoſe who doubt of the exiſtence of ſwelled teſtes from Lues Venerea aſſert, that where the teſticle becomes hard and enlarged, where no external violence has been applied to it, and without being preceded by Gonorrhœa, that the diſeaſe is always to be conſidered as of the true ſchirrous kind, forming what in general is called ſarcocele. This, however, is by

no means the caſe, and the means of diſtinguiſhing between ſarcocele and the true venereal ſwelling of the teſticle are numerous and obvious. In the former the teſticle has a conſiderable degree of hardneſs from the firſt. The patient is, from the firſt commencement of the diſeaſe, diſtreſſed with ſharp ſtinging pains through the body of the tumour, and by degrees theſe become as ſevere as they uſually are in any caſe of cancer. The ſwelling, although at firſt ſmooth, ſoon becomes knotty and unequal, and at laſt it very conſtantly attacks the ſpermatic cord, which alſo becomes hard, knotty, and painful. Now, in a ſwelled teſtis from Lues Venerea, although a conſiderable degree of firmneſs takes place, it is by no means of that hard nature which always accompanies ſchirrus. We meet with no ſtinging pains, not even in the moſt advanced ſtages of the diſeaſe. The ſwelling never becomes hard and knotty, but retains a ſmooth, equal ſurface, and

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we meet with few inſtances of its proceeding to the ſpermatic cord.

In addition to the deſcription which I have given of the diſeaſe I may remark, that in its more advanced ſtages this ſwelling ſometimes ſuppurates, and diſcharges purulent matter; while in ſarcocele, whenever the tumour burſts, it yields nothing but a thin, bloody ſanies, as commonly happens in all caſes of cancer. The ſores which enſue to the burſting of theſe tumours are fully as different in their appearances as the tumours are different by which they were produced. In the ſarcocele the edges of the ſore are hard and retorted, accompanied with every other circumſtance that uſually takes place in cancer; whereas in the venereal ſwelled teſticle, although the edges of the ſore are hard, they are neither raiſed nor retorted, and the ſore, while it is foul and ſloughy, as venereal ſores always are, exhibits no appearances of cancer.

In very advanced ſtates of this diſeaſe we ſometimes find it accompanied with

effuſions into the tunica vaginalis teſtis, producing what may be termed a complicated hydrocele. This, however, is a circumſtance equally common to every tumour of the ſame magnitude and duration to which the teſticle is liable. It even ſometimes ſucceeds to the hernia humoralis, but not ſo frequently as to ſwellings of greater permanency.

If this affection of the teſtes is neither uncommon nor difficult to diſtinguiſh, it may be ſaid that the particular deſcription which is here given of it is unneceſſary; and I ſhould have judged it to be ſo, if in ſome late publications a contrary opinion had not been ſtrongly inculcated. Even this would not have been a ſufficient reaſon for dwelling long upon any point of little importance, but in the ſubject we are now conſidering many circumſtances are involved. Any theory we can eſtabliſh of the nature of the venereal poiſon, and of the means employed for removing it from the conſtitution, is in ſome meaſure connected

with

with it; while, at the same time, it is obviously a point of real importance in practice.

§ 11. *Of Alopecia.*

The disease termed Alopecia by Nosologists, or falling off of the hair, may be produced by different causes; but it is most frequently met with as a symptom of Lues Venerea in the more advanced stages of the disease.

The hair of the head first separates in greater quantities than usual on being combed. The eye-brows become more thinly covered, and if a stop be not put to the disease of the constitution, all the hair of the head, as well as of the other parts of the body, soon falls off.

Before the hair begins to separate, a scurf is usually perceived among the roots of it, which comes away in great quantities on the head being combed, commonly in the form of fine bran. On this

ſcurf being removed, the ſkin beneath has a red complexion; but the patient does not complain either of pain or tenderneſs, and the ſame kind of brany powder forms repeatedly on the ſame parts, although carefully removed from day to day.

In ſome inſtances the hair is renewed in as great quantity as at firſt; but this is not a frequent occurrence: It only happens during youth, and where the virus of the diſeaſe is quickly and completely eradicated. In more advanced periods of life it always remains thin, not only upon the head, but on the eye-brows; and when the eye-laſhes fall out from this cauſe they very ſeldom return.

As mercury has commonly been given before the hair begins to ſeparate, and often in conſiderable quantities, this ſymptom has by ſome been ſuppoſed to be more the effect of the medicine than of the diſeaſe. This, however, has not been the reſult of my obſervation. I have ſeen different inſtances of the hair dropping off in Lues Venerea, where no mercury had

had been employed; and were it to be produced by mercury, it would neceſſarily occur more frequently, and it would happen with equal readineſs in every diſeaſe for which mercury ſhould be preſcribed.

I conſider it to be in almoſt every inſtance the effect of that ſcurf which in Lues Venerea ſometimes forms among the roots of the hair. The matter by which the ſcurf is produced getting acceſs to the roots, ſoon cuts off their connection with the ſurrounding parts.

§ 12. *Of Blindneſs as a Symptom of Lues Venerea.*

In the firſt chapter of this work ſome account is given of blindneſs produced by the retropulſion of the matter of Gonorrhœa. But blindneſs which takes place in Lues Venerea is materially different both in its riſe and progreſs, and in the re-

remedies by which it is with moſt certainty removed.

Blindneſs from Gonorrhœa is always accompanied with much pain. A great degree of irritability, along with a plentiful diſcharge of matter from the eyes, and more or leſs inflammation, are the firſt ſymptoms of the diſeaſe. But in Lues Venerea, loſs of viſion, to a conſiderable extent, has commonly taken place long before much pain is experienced; and if inflammation ever occurs, it is not in any remarkable degree.

The matter of Lues Venerea acts in different ways in producing blindneſs. One of the moſt frequent ſeems to be by injuring the optic nerves, whether by acting immediately upon the nerve itſelf, or by firſt exciting effuſion, or the formation of tumours in the contiguous parts, by which compreſſion of the nerve is at laſt produced.

It is in this manner I conceive that gutta ſerena takes place in the latter ſtages of Lues Venerea. In ſome caſes it comes

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on in a gradual manner. The ſight becomes leſs perfect from day to day; and both the patient and his friends are ſurpriſed that this ſhould happen while the external appearance of the eye is not affected. But for the moſt part the diſeaſe takes place almoſt inſtantaneouſly, the patient being entirely deprived of viſion in the courſe of a minute or two from the time that his eyes became uneaſy. Still the external parts of the eyes remain ſound, but the pupils are always greatly dilated, and incapable of any degree of contraction, even when expoſed to the ſtrongeſt light.

In ſome caſes only one eye is affected, but for the moſt part the diſeaſe attacks both at the ſame time.

Cataracts ſometimes form from this cauſe. I have met with different inſtances of this diſeaſe in the latter ſtages of Lues Venerea, where no other cauſe could be aſſigned for it; and I conclude that it was the effect of the venereal poiſon, from the peculiar manner of its approach. The lens

lens is at firſt only partially affected, white ſtreaks appear upon different parts of it, which extend by degrees, ſo as to produce opacity over the whole of it.

But the moſt frequent effect of the venereal virus upon the eye appears upon the vitreous and aqueous humours, and on the lucid part of the cornea. In ſome caſes theſe humours are deprived of their natural tranſparency, they become ſomewhat milky, and at laſt completely opake. At other times this is evidently connected with an opake ſtate of the lucid cornea, which becomes white and thickened, and in ſome inſtances ſo prominent as to disfigure the whole globe of the eye. When this diſeaſed ſtate of the coats of the eye, and of the humours which they contain occur at the ſame time, the whole body of the eye affords the appearance of one confuſed maſs. Neither the chryſtalline lens, nor any particular part of the eye can be diſtinguiſhed.

Before this opacity takes place in the cornea, a number of obſtructed veſſels

are perceived on it, accompanied with ſome degree of tenderneſs on being expoſed to light: This gives cauſe to ſuppoſe that inflammation is about to occur; but the diſeaſe in this form makes no farther progreſs. The cornea in ſome ſpots becomes white and opake, probably by the effuſion of part of the contents of theſe turgid veſſels; but all this takes place with little or no pain, and without any of the ordinary concomitants of inflammation. Neither does this whiteneſs of the cornea terminate in ſuppuration, as opacity of this membrane produced by inflammation is apt to do. It becomes even more white than the tunica albuginea itſelf, and evidently more thickened, but I never ſaw matter form in it.

In ſome caſes the venereal virus fixes upon the eye-lids, and chiefly upon their cartilaginous boarders. This ſometimes happens by itſelf, but for the moſt part it is connected with ſyphilitic eruptions in other parts of the body. The parts become red and ſomewhat tender, and an effu-

effuſion takes place among the eye-laſhes, either in the form of a dry ſcurf, or of a gummy viſcid matter. In this latter ſtate this effuſion proves always very trouble-ſome, particularly after ſleep, as it glues the eye-lids ſo firmly together as to render it difficult, and even painful to open them.

In this affection of the eye-lids, I have, in different inſtances, obſerved a ſymptom which has not, ſo far as I remember, been remarked by authors. The tears at firſt form in drops near the internal angle of the eye, and this terminates in a conſtant trickling over the cheeks. Thoſe who are not accuſtomed to examine the eyes in this ſtate are apt to conſider this flow of tears as the commencement of fiſtula lachrymalis, whereas it proceeds from a cauſe which muſt effectually prevent the formation of this diſeaſe. On minute inſpection, it appears evidently to ariſe from the puncta lachrymalia being obſtructed by the viſcid matter forming upon the cartilages of the eye-lids,

lids, by which the tears which ſhould paſs by theſe openings into the lachrymal lac, and from thence into the noſe, are neceſſarily forced over the cheeks. In ſome caſes this weeping ſtate of the eyes proves to be temporary, and diſappears with the cauſe by which it was produced; but in others it continues permanent, owing, I ſuppoſe, to the puncta being obliterated by the long continuance of the diſeaſe.

This conſtant flow of tears over the eye-lids proves always troubleſome, and in ſome caſes even painful, by exciting tenderneſs, and occaſionally ſome degree of ulceration of the cheeks.

§ 13. *Of Deafneſs from Lues Venerea.*

WHEN treating of the venereal ſore throat in § 4. of this ſection, we had occaſion to remark that a certain degree of deafneſs is, in ſome caſes, a conſequence of that ſymptom, the end of the Euſtachian tube, when it terminates in the throat, being

being obſtructed. The effect reſulting from this being in ſome inſtances conſiderable, we are led to ſuppoſe that this paſſage to the ear is of no ſmall importance to the ſenſe of hearing: I have known a very diſtreſsful degree of deafneſs produced by it.

Beſides this, the venereal diſeaſe in ſo many inſtances excites deafneſs by fixing upon the ear itſelf. The bones ſeem to be moſt liable to be attacked with it. When this takes place the patient is at firſt ſeized with a partial loſs of hearing. This is ſucceeded by a diſcharge of fœtid ill-coloured matter; and in ſome caſes the bones themſelves come away. I need ſcarcely obſerve, that a total and permanent loſs of hearing enſues.

Where venereal blotches prevail univerſally over the body, and have been of long duration, they ſometimes fix upon the ear, chiefly upon the lap of the ear. In ſome caſes I have known them to affect the meatus externus ſo as to induce a temporary deafneſs. In this event the paſſage is either ſtuffed with a dry ſcurfy

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matter, or the lining membrane of the paſſage becomes thickened, and occaſionally tender and ulcerated. If this proceeds no farther into the ear a recovery may ſtill take place; but as the ſame kind of tenderneſs is apt to attack the tympanum, deafneſs even from this cauſe often proves permanent.

§ 14. *Of Anomalous Symptoms.*

Besides the ſymptoms of which we have given a deſcription, there are others which from their appearing with leſs regularity may be termed anomalous. But theſe, although they occur occaſionally in every ſtage of the diſeaſe, prevail with moſt frequency when the infection has been of long duration.

The moſt troubleſome of theſe ſymptoms are chops, or clefts in the palms of the hands and ſoles of the feet. A red ſomewhat purple-coloured eruption appears

upon the ſkin of theſe parts. The cuticle ſeparates and comes away: Still the ſkin remains diſcoloured; and at laſt chops form in different parts of it. They generally remain dry, but in ſome inſtances they diſcharge a thin acrid matter. They are ſeldom painful; but they are always obſtinate and difficult to cure; and the cuticle is in ſome caſes ſo completely removed, that by the tenderneſs which ſucceeds to this the patient is for a conſiderable time deprived of the uſe both of his hands and feet.

In ſome a diſpoſition is formed in the ſkin and cellular ſubſtance of different parts of the body to become thick, rough, and unequal, roducing what by Noſologiſts is termed elephantiaſis, or at leaſt an affection which very much reſembles that diſeaſe. In moſt inſtances where this has occurred, different parts of the body have been affected with it at once; but in others I have known it confined to one of the extremities. In the ſlighter degrees of this affection the inconvenience produ-

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ced by it is inconſiderable, and it is ſeldom accompanied with much pain; but where the limbs ſwell ſo much as they ſometimes do, the diſtreſs which it excites is neceſſarily ſevere. A limb which ſwells from this cauſe becomes firſt very unwieldy; and on the ſwelling increaſing, it at laſt burſts into ſores, which diſcharge a thin acrid matter, are always foul, and very ſeldom heal.

I have met with different inſtances of this thickening of the teguments in the ſcrotum. The ſkin retains its natural colour; but it becomes firm, and ſo much thickened as to form a tumour which in ſome caſes acquires a very conſiderable bulk. All of them that have fallen within my obſervation came from warmer climates, and two of them were in negroes. They had been miſtaken both for hydrocele and hernia, but I found in all of of them that the tumour was produced entirely by a thickened ſtate of the ſcrotum.

From a hernia in the ſcrotum they are diſtinguiſhed by the ſpermatic cord being entirely free of ſwelling; by the abſence of all the ſymptoms of hernia; and by the ſwelling being much more firm than it ever is in hernia. The ſame degree of firmneſs ſerves to diſtinguiſh it from hydrocele, for no impreſſion is made upon it by preſſure; and it is farther diſtinguiſhed from it by its weight, being much heavier than any tumour of equal magnitude containing a fluid.

This ſwelling of the ſcrotum bears a greater reſemblance to ſarcocele, or a ſchirrous teſticle, than to any other affection of theſe parts. It is chiefly diſtinguiſhed from ſarcocele by being totally free of pain, and from being of an equal ſmooth ſurface. The other is not only accompanied with pain, but the ſwelling is knotty and unequal.

As the ſores which occur upon theſe tumours are very apt to aſſume a cancerous appearance, and ulcers of a ſimilar aſpect being ſometimes obſerved to ſucceed

ceed to buboes, ſome have been thereby induced to conſider cancer as a ſymptom of this diſeaſe. That the matter of Lues Venerea may occaſionally produce ſores which terminate in cancer will not be diſputed; but we are not from this to conclude, either that the matter of the two diſeaſes is the ſame, or that cancer ſhould be conſidered as a ſymptom of ſyphilis.

Beſides the pains reſembling rheumatiſm, which occur in Lues Venerea, and of which we had occaſion to ſpeak when treating of nodes and affections of the periosteum, pains of a different kind are apt to take place in the more advanced ſtages of the diſeaſe. They do not remain fixed or permanent, but produce ſharp momentary ſtings, without leaving ſwelling or any other mark behind them. They are moſt frequent in the neck, temples, and jaws. In the latter they are often ſuſpected to proceed from carious teeth, when on examination no affection of this kind can be perceived, or if there are

any, no relief is obtained from pulling them. A falling out of the teeth has been frequently deſcribed as a ſymptom of Lues Venerea, but I have never met with it excepting where the patient had taken a great deal of mercury, and where it appeared evidently to proceed more from the medicine than from the diſeaſe.

One of the moſt frequent ſymptoms of the advanced ſtages of ſyphilis is atrophy, or a gradual waſting of the body. This is no doubt a frequent effect of a mercurial courſe, particularly when too much of the medicine has been exhibited; but it is alſo a ſymptom of the diſeaſe. Even where little or no mercury has been given I have known a patient become much emaciated in the courſe of a ſhort time. From a ſtate of obeſity, and with a healthy, florid complexion, a perſon will in ſome inſtances become ſuddenly lean, while his face will be wan or ſallow, as if the veſſels were altogether deprived of red blood. This I conſider

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as one of the moſt fatal ſymptoms of the diſeaſe, from which, in the courſe of my obſervation, few or none have ever recovered.

Irritability and reſtleſſneſs are two ſymptoms of this diſeaſe. When Lues Venerea has been of long duration the ſyſtem becomes ſo irritable that the moſt trifling occurrences prove diſtreſsful. No application can be given to buſineſs; the patient becomes fretful and uneaſy, and his nights are ſpent in watching.

The conſtant anxiety which takes place here is often connected with that ſtate of atrophy which we have juſt deſcribed. It ſeems in ſome caſes indeed to be the cauſe of it. Being always accompanied with an entire loſs of appetite this of itſelf ſoon reduces the body to the moſt emaciated ſtate.

But the moſt univerſal ſymptom of the anomalous kind which prevails in Lues Venerea is fever. Nor is it confined to one ſtage of the diſeaſe. Occaſionally it takes place in all of them. It is neceſ-

ſary, however, to remark, that fever which occurs in the commencement of the diſeaſe is very different from that which moſt frequently prevails afterwards. The firſt may more properly be conſidered as ſymptomatic, being always connected with ſome local affection, ſuch as bubo, ſore throat, ulcer, or node, while the other often takes place where no other mark of the diſeaſe can be diſcovered. The one therefore ſubſides along with the particular cauſe by which it was produced, while the other continues obſtinate as long as the virus of the diſeaſe remains in the conſtitution. It is this laſt, therefore, which is of moſt importance, and merits moſt of our attention.

This fever is always of the hectic kind, and accompanied with ſome colliquitive ſymptom, particularly with nocturnal ſweats. Hence the patient ſoon becomes emaciated, but a peculiarity occurs here not met with in others fevers; at the ſame time that the patient becomes languid and reduced he is commonly able

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to tranfact his ordinary bufinefs, and often continues to do fo for a confiderable time after the fever has taken place. He is liable to alternate fits of cold and heat; particularly to much warmth over the whole body in the evening; to reftlefsnefs and anxiety during the night, and to a conftant quicknefs of pulfe; but thefe fymptoms, while they do not come to any great height, do not excite much alarm, and the patient, while no local affection takes place, continues daily in hopes of getting free of them.

For a confiderable time both the patient and practitioner find it difficult to account for thefe fymptoms. They are often attributed to cold; in fome cafes to an incipient pthifis; and in others to fcrophula. Remedies for one, or perhaps for all of thefe difeafes, are accordingly prefcribed, and no advantage being derived from them, the real caufe of the fever either is not difcovered, or at laft the difeafe breaks out in fome fuch obvious form as leaves no caufe for doubt.

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Among other reaſons of this uncertainty may be mentioned an opinion which much pains has been taken to inculcate, and which of late has unhappily begun to prevail among thoſe who have not had ſufficient opportunities of being enabled to judge for themſelves. It has been with much confidence aſſerted, that the matter of Lues Venerea cannot exiſt in the ſyſtem, ſo as to induce any ſymptom of diſeaſe, without ſhewing itſelf upon the ſurface of the body, or in ſome ſuch manner as to be at once clear and evident. We ſhall ſoon have occaſion to enter more fully upon the conſideration of this queſtion, but at preſent I may obſerve, that the opinion to which I allude, although ſupported with ſome ingenuity, appears to be altogether void of foundation, being directly contrary to the obſervation of all practitioners of experience; for I hold it as a certainty that the matter of Lues Venerea often exiſts in the conſtitution for a great length of time, and is productive of fever, as well as a variety of other ſymptoms,

toms, where no local affection ever ensues. It may happen where no mercury has been employed; but we meet with it most frequently where this medicine has been used, but not in sufficient quantities for effecting a total removal of the virus; where it therefore remains in the system, and after lurking there for a longer or shorter period, according to circumstances, either breaks out early in an obvious manner, or before doing so excites fever or some other anomalous symptom of a still less suspicious nature.

In all such cases of doubt and uncertainty we must be directed entirely by the history of the rise and progress of the complaint, and by our own observation in affections of a similar nature.

SECT.

SECTION III.

Of the Venereal Virus.

HAVING in the different parts of the preceding ſection given a deſcription of the various ſymptoms of this diſeaſe, I ſhall now offer a few remarks upon the virus by which they are produced.

Of the real nature of the venereal virus no correct knowledge is obtained; and as it can never be procured in a ſimple ſtate we can ſcarcely expect that much ſatisfaction would reſult from any inquiries that could be made concerning it. We meet with it moſt frequently mixed with pus or mucus, and ſometimes with blood and ſerum; but ſo intimately is it blended with theſe fluids, and ſo little are we acquainted with the peculiar appearances of this

this matter, that we are not able to diſtinguiſh it. By ſome the matter of Lues Venerea has been ſuppoſed to be of an acid nature; others conſider it as an alkali. One ſet of practitioners have ſaid that it is of a putreſcent quality, while others aſſert the reverſe. It is evident, however, that all ſuch opinions muſt be merely hypothetical, ſo long as the matter to be inveſtigated cannot be made obvious to the ſenſes in an uncombined ſtate.

But although there may be ſome circumſtances relative to the matter of ſyphilis which we may never be able to explain, there are others which we can trace with ſome preciſion, and upon which I now mean to make a few obſervations. The circumſtances to which I ſhall advert reſolve themſelves into the following queſtions: Upon what parts does the matter of ſyphilis chiefly act in producing Lues Venerea? When received into the ſyſtem can the poiſon remain there without producing the diſeaſe? And is it poſſible for a perſon with the virus in a latent ſtate, and without

out any mark of difeafe, to communicate the infection to others ?

Various opinions have prevailed upon the manner in which the matter of difeafes enters the conftitution. Some contend that it is taken up folely upon ths furface of the body ; others that it enters perhaps entirely by the lungs ; while fome are of opinion that a great proportion of difeafes take their origin in the ftomach and alimentary canal. But the point upon which pathological writers have chiefly differed is, Whether the matter of difeafe, when it has once entered the fyftem, acts moft particularly upon the folids or fluids ?

The humoural pathology, as it is called, prevailed univerfally for a great length of time. Difeafes were fuppofed to be feated chiefly, if not entirely, in the fluids ; and fo generally was this opinion received, that although others were occafionally propofed, they were confidered only as innovations, and for the moft part foon fell to the ground.

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Of late, however, the oppoſite doctrine has begun to be more generally received, and it has become faſhionable to explain the phenomena of every diſeaſe, and the operation of almoſt every medicine employed for curing them, by their influence upon the ſolids. To me it appears that both opinions have been carried too far; and while one party have ſupported one opinion, and the other the very reverſe, that it is probable no diſeaſe of the conſtitution can take place without every part of the ſyſtem being affected. I think it evident, however, that every diſeaſe produced by contagion acts firſt upon the fluids, and that the ſolids are ultimately affected in a ſecondary way only.

In Lues Venerea this appears to be ſtill more clearly the caſe than can be demonſtrated in almoſt any other diſeaſe; a circumſtance, however, that tends to ſupport the general principle of the doctrine, even where this kind of proof cannot be obtained; for if it obviouſly happens in one diſeaſe where the matter of

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infection can be clearly ſhown to affect the fluids in the firſt inſtance, we have reaſon from analogy to conclude that it may likewiſe be ſo in others, although it may not from a concurrence of circumſtances be in our power to ſhow it.

To enter fully upon the conſideration of this doctrine, a greater length of diſcuſſion would be required than the nature of this work will admit. I ſhall therefore only mention ſhortly ſuch circumſtances as tend moſt clearly to eſtabliſh the opinion which I adopt; and even this might have been unneceſſary if there was not reaſon to ſuppoſe that much inconſiſtent practice would be the conſequence of that opinion being admitted, which of late a great deal of pains has been taken to eſtabliſh.

Whatever may be the caſe in other diſeaſes, that the fluids are chiefly affected in Lues Venerea is rendered evident by the following circumſtances.

1. The contagious matter of this disease is always communicated in a fluid form. But it is alleged, although this is the case, that even upon its first application it shows a tendency to act chiefly upon the solids, by exciting inflammation wherever it is applied. This appears, however, to be only an accidental, not an essential property of the matter; for instances are frequent, as we have already had occasion to remark, in which it enters the system without inducing either inflammation or erosion. By the acrimony which the matter seems to possess inflammation most frequently takes place on the spot to which it is applied, by which the corresponding absorbents are with more certainty made to receive it than might otherwise be the case; but no other conclusion can be drawn from this. It happens here, as we have already had occasion to remark on the practice of innoculating for the small pox, that the matter of infection does not readily enter the system where inflammation is not excited; but surely few will suppose that we would

fail in producing either of theſe diſeaſes, were we poſſeſſed of any method of introducing the matter to the common courſe of circulation without exciting inflammation. Even this, however, has been alleged by ſome; but beſides other circumſtances which might be mentioned as proofs of the contrary, the cleareſt evidence of it is obtained, and of inflammation not being eſſentially neceſſary for the production of ſmall pox, from the manner in which the natural form of the diſeaſe uſually appears, where no inflammation, or any other local affection is perceived till the diſeaſe has taken place, when the firſt effects that occur from it are, fever, and quantities of matter thrown out upon the ſurface. This takes place in a more obvious manner in ſmall-pox, but it alſo happens in Lues Venerea, in which a great proportion of the ſymptoms are evidently produced by contagious matter of a ſimilar nature to that which firſt entered the lymphatics at the time of infection, for the matter produced by venereal ulcers and erup-

eruptions will very certainly produce every ſymptom of the diſeaſe, if by any means it is thrown into the ſyſtem of a ſound perſon. Of this every practitioner, I preſume, is ſo much convinced, that even thoſe who have thought proper in theory to ſupport a contrary opinion would not willingly expoſe themſelves to the hazard of being infected with matter of this kind.

2. It has been a queſtion agitated with ſome warmth, in what manner does the virus act on being conveyed to the maſs of blood? At one period fermentation was conſidered as a principal agent in producing diſeaſe. The matter of infection being received into the circulation, it was ſuppoſed by means of fermentation to poſſeſs a power of converting the whole fluids of the body into its own nature. This opinion, however, was liable to various objections, and particularly to this, that it is difficult to conceive how fermentation can go on in fluids in circulation.

In a ſtate of extravaſation we can eaſily ſuppoſe that it may happen; but while life ſubſiſts the fluids are kept in ſuch perpetual motion that we cannot eaſily conceive how ſuch a proceſs can take place. But although fermentation, in the full acceptation of the word, may not occur from this cauſe, I think it highly probable that the matter of all contagious diſeaſes, and more eſpecially the matter of Lues Venerea, has a power of aſſimilating to its own nature a certain portion, and ultimately, perhaps, the whole fluids of the body.

3. This power may be quick or ſlow in its progreſs according to a variety of circumſtances, but which, from our limited knowledge of the laws of the animal œconomy, it may never be in our power to aſcertain.

4. While the quantity of matter thus aſſimilated is inconſiderable no marks of diſeaſe will be produced, nor will any effects

fects result from it till it prevails in such quantity as to be capable of exciting some degree of morbid irritability in the living principle.

5. From all this I conceive that in Lues Venerea the matter of contagion acts in the first instance upon the fluids, and that the solids are not otherwise affected, than in being excited by this morbid state of the fluids to some degree of unusual exertion for the purpose of throwing them off, by which eruptions on the skin are produced, with ulcers of different parts, as well as all the other symptoms of the disease.

6. From this view of the origin of Lues Venerea we account for the matter of contagion remaining longer inactive in some instances than in others. Besides any difference which may take place in the state of the fluids upon which the matter has to act, and by which the assimilation to which we allude may be accelerated or

retarded, the different degrees of irritability which prevails in different perſons, and even in the ſame perſon at different times, will alſo co-operate in producing an early or latter formation of the ſymptoms; for while ſome are eaſily ſtimulated, and may therefore be acted upon almoſt as ſoon as the matter of contagion enters the ſyſtem, others of more ſluggiſh temperaments may, for the production of the ſame effect, require the matter to be accumulated in ſuch quantities as nothing but a great length of time can accompliſh.

7. It may be ſaid in oppoſition to this opinion, that as ſoon as this accumulated ſtate of morbid matter is accompliſhed the effects of it ſhould appear equally upon every part of the body; for the fluids circulating over the whole, the effects of any diſeaſe to which they are liable ſhould not be confined to particular parts, as we find to be the caſe in Lues Venerea. To this it may be anſwered, that many inexplicable

plicable circumſtances occur in every diſeaſe, and that in this reſpect the venereal diſeaſe is not different from a variety of others in which particular parts are more apt to be affected than others, and where it is equally difficult to explain why they ſhould be ſo. Thus it is as impoſſible to ſay, why the matter of gout ſhould fix moſt frequently upon the great toe as it is to explain the cauſe of the throat and noſe being particularly apt to ſuffer in Lues Venerea. There may be ſome kind of attraction between particular parts and the matter of certain diſeaſes; or theſe parts may be more eaſily irritated than others, and which ever of theſe may be the caſe the ſame conſequences will enſue.

8. It is aſſerted by thoſe who ſupport the contrary opinion, that we cannot in any inſtance diſcover the cauſe of diſeaſe to be in the fluids. This indeed they are under the neceſſity of doing in order to give the appearance of probability to their theory in any caſe. By diſcovering

therefore, that this aſſertion is ill-founded, and that in other inſtances the fluids are obviouſly affected, we might from analogy ſay, that they are ſo in Lues Venerea, were the proofs which we have adduced of it leſs evident than we have ſhown them to be. Now the action of ſeveral other poiſons is rendered evident to the ſenſes. This is particularly the caſe with the poiſon of different kinds of vipers in which ſerous effuſions take place in different parts of the body, often in the courſe of a few hours from the time of the bite being inflicted, and in which the colour of the whole ſerum of the blood is even in that ſhort ſpace of time tinged of a morbid yellow colour.

9. They who are of opinion that the cauſe of diſeaſe is not ſeated in the fluids are under the neceſſity of denying in more inſtances than one, what in Lues Venerea is well known to be matter of fact. They are obliged to ſay that the blood is perfectly ſound, and that neither this fluid, nor any of the ſecretions pro-

produced from it, are capable of communicating infection. A theory being once formed, every argument that militates against it is apt to be overlooked, while, in order to support it, facts are explained away in a manner which they will not bear. This, in some instances, may be followed by very pernicious consequences, particularly where such modes of reasoning are adopted and promulgated by authors of ingenuity and reputation; and as Mr. Hunter of London has gone farther than any other author in support of the opinion that the syphilitic virus cannot be conveyed by or affect the fluids, the following observations will relate particularly to his work *.

" We may observe (says Mr. Hunter), that even the blood of a pocky person has no power of contaminating, and is not capable of giving the disease to another even by inoculation; for if it were capable of irritating a sound sore to a venereal inflammation, no person that had

* Vide a quarto edition, published in 1786.

this

this matter circulating, or had the Lues Venerea, could efcape having a venereal fore, whenever he is bled, or receives a fcratch with a pin, the part fo wounded turning into a chancre, &c." Vide p. 292. Now Mr. Hunter here affumes as matter of fact what is not the cafe; for although all wounds inflicted upon patients labouring under Lues Venerea do not become venereal ulcers, yet frequently, and in almoft every inftance of the more advanced ftate of the difeafe they do fo. I have at this time a gentleman under my care whofe cafe affords an inftance of this, where the bites of leeches applied to the fcrotum on account of inflammation of one of the teftes, the confequence of Gonorrhœa, degenerated into venereal fores. This I informed him would not have happened from Gonorrhœa alone. And upon inquiry he acknowledged that fix months ago he laboured under chancres and bubo, for which he fufpected that he had not ufed enough of mercury, and that for a week paft he had felt uneafinefs in his throat, where I found, on infpection, that an ulcer had

had already formed on one of the tonsils.

In the course of business I have met with a variety of similar cases, and every practitioner must have done so. It must be remarked, however, that we have seldom occasion to take blood, either with the lancet or leeches, in symptoms truly venereal. It is in Gonorrhœa chiefly that this remedy becomes necessary; a circumstance, I may observe, that affords a farther proof of the difference of the two diseases; for while the symptoms in Gonorrhœa are often so acute, and the inflammation so violent, as to render it necessary to discharge a good deal of blood, this almost never happens in Lues Venerea, a disease in which the parts affected become red and of a copper-colour, accompanied with some degree of uneasiness, but in which that kind of inflammation requiring blood-letting scarcely ever takes place.

Mr. Hunter was resolved, however, not to rest satisfied with asserting that the blood

blood of a venereal patient could not communicate infection. In the fame page, viz. 292, he even fays, that the matter produced by fuch ulcers at occur in Lues Venerea is not venereal, and that it will not produce the difeafe. That there may be no fufpicion of miftake on my part, I fhall tranfcribe his words. "When the matter has got into the conftitution it from thence produces many local effects on different parts of the body, which are in general a kind of inflammation, or at leaft an increafed action, occafioning a fuppuration of its own kind; it is fuppofed that the matter produced in confequence of thefe inflammations, fimilar to the matter from a Gonorrhœa or chancre, is alfo venereal and poifonous. This I believe till now has never been denied, and upon the firft view of the fubject, one would be inclined to fuppofe that it really fhould be venereal; for firft the venereal matter is the caufe; and again the fame treatment cures both difeafes; thus mercury cures both a chancre and Lues Venerea;

nerea; however, this is no decisive proof, as mercury cures many diseases besides the venereal. On the other hand, there are many strong reasons for believing that the matter is not venereal. There is one curious fact, which shows it is either not venereal, or if it be, that it is not capable of acting in some respects on the body or same state of constitution, as that matter does which is produced from a chancre or Gonorrhœa. The pus from these latter, when absorbed, generally produces a bubo, as has been described, but we never find a bubo from the absorption of matter from a pocky sore; for instance, when there is a venereal ulcer in the throat we have no buboes in the glands of the neck; when there are venereal sores on the arms, or even suppurating nodes on the ulna, there are no swellings of the glands of the arm pit, although such will take place if fresh venereal matter is applied to a common sore on the arm, hand, or fingers, &c."

Now

Now all this is ſuch looſe reaſoning as could not have been looked for in a man of Mr. Hunter's experience and obſervation. His overlooking every argument militating againſt his favourite theory can alone account for it. If the fact be not general no dependence can be placed upon it. If it be general it is not curious: neither is it the caſe that the matter of chancres and Gonorrhœa generally produces buboes. The matter of chancres often does, but it much more frequently does not; and few practitioners, I believe, will ſay that buboes are frequent conſequences of Gonorrhœa.

I cannot ſay what may have been the reſult of Mr. Hunter's experience, but I have met with many inſtances of buboes, or ſwelled glands, in the thigh, axilla, and neck, as obviouſly produced by ſores in the feet, legs, hands, and throat, as buboes commonly are in the groin from chancres on the penis. But admitting that the occurrence is not frequent, ſtill this is no reaſon for ſuppoſing that the matter of

theſe

these sores is not venereal. If the matter be not absorbed no more harm will ensue from it than if it had never been formed; and in section II. of this chapter I have shown that it is not so frequently absorbed as the matter of chancres. The reason of this I have also endeavoured to explain, by shewing, that some degree of irritation is required for the purpose of exciting the absorbents to action; and as the matter of Lues Venerea seems to possess very little power of exciting irritation, excepting such as is produced by the primary sores of the disease, it is accordingly seldom absorbed, and still less frequently does it produce buboes; for being of a mild nature it does not so readily stimulate the lymphatics, so as to produce obstructions in the glands as it goes along.

Mr. Hunter would have found it difficult, or even impossible, to explain consistently with his theory of the disease, a number of circumstances which we daily observe. He therefore denies that they exist; and he seems to have no difficulty in

in doing ſo, even where they are admitted by all unbiaſed practitioners. In page 291, he ſays, "it is alſo ſuppoſed that a fœtus in the womb of a pocky mother may be infected, and have the diſeaſe from her, as it were naturally interwoven with it. This I ſhould doubt very much, &c." And in page 295, he ſays, "It has been ſuppoſed, and aſſerted from obſervation, that ulcers in the mouths of children from a conſtitutional diſeaſe, which conſtitutional diſeaſe was ſuppoſed to be derived from the parent, produced the ſame diſeaſe upon the nipples of women who had been ſucked by them, giving it as it were at the third hand; that is, the children were contaminated either by their mother's or father's having the diſeaſe in form of a Lues Venerea, of which I have endeavoured to ſhow the impoſſibility."

Mr. Hunter has certainly endeavoured to ſhew the impoſſibility of this, for his ſyſtem could not otherwiſe have had the leaſt plauſible appearance; but none, excepting

ing ſuch as have not had opportunities of being able to form judgments for themſelves, will ſay that he has proved ſucceſsful. If I can give credit to any fact with which I am acquainted I muſt believe in this, that children may receive, and frequently do receive the venereal diſeaſe from their parents labouring under it in a conſtitutional form; and that ulcers in the mouths of theſe children will, and frequently do produce the ſame diſeaſe upon the nipples of women whom they ſuck. Nay, that theſe will give it again to other children, and theſe children to other nurſes; circumſtances which I have ſo frequently witneſſed, ſo ſtrongly marked, and followed by conſequences ſo diſtreſsful to innocent ſufferers, that I cannot help expreſſing aſtoniſhment that a practitioner of any experience ſhould entertain a doubt of their exiſtence.

Mr. Hunter, in page 296, proceeds to ſay, with ſome appearance of exultation, as judging it to be an unanſwerable argu-

ment, that were it poſſible to contaminate once in this way it would be poſſible to contaminate for ever;" a circumſtance which he ſeems to conſider as ridiculous: But ſurely all this would happen. Nurſes and children infected in this manner would undoubtedly continue to communicate the contagion to others as long as they were not cured of the diſeaſe. Nor would there be any thing in all this that does not daily happen; and in whatever way the diſeaſe is communicated we have reaſon to think that it would be the caſe.

In order I ſuppoſe to convince others that he himſelf at leaſt is convinced of the opinion which he ſupports being well founded, Mr. Hunter, in p. 12, goes even farther than any thing I have yet mentioned: That the venereal diſeaſe is to be propagated only by matter is proved every day, he ſays, by a thouſand inſtances. And in the belief of this being the caſe he afterwards obſerves, that he has gone ſo far as to allow married men who had

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contracted the disease to cohabit with their wives, in order to save appearances, and always with safety: Nay, that he could carry this still farther, and allow a married man who has a Gonorrhœa to have connection with a sound woman, if he took care to have all the parts cleared of matter, by syringing the urethra, making water, and washing the glans.

I believe with Mr. Hunter, and every practitioner perhaps will do so, that the risk of communicating infection will not be so considerable where no matter is formed as where ulceration actually takes place; but I also know, that a woman would run much risk of being injured by cohabiting with a man whose blood was infected with matter of syphilis, although no local marks of it should appear, for I have met with various instances of it; and I also know from a variety of facts, that both father and mother, in situations such as this, and where no bad symptoms were ever perceived, have communicated the

diſeaſe to the fœtus. Where this has happened from the mother being infected, the matter of contagion muſt paſs from the mother to the child along with the blood; but where it takes place from the father, as is moſt frequently the caſe, there is no other mode by which it can be conveyed but by the ſemen. We ſhall have occaſion, however, to make ſome farther obſervations upon this ſubject when treating of Lues Venerea in new-born infants.

From all that I have ſaid, I think it will appear that the matter of contagion in Lues Venerea, in the firſt place, acts upon the blood alone; that by accumulation it comes to irritate the ſolids or containing parts, and in this manner that effuſions and conſequent ulcerations are produced; that the venereal poiſon may remain long latent in the ſyſtem; that this will depend upon the irritability of the perſon, as well as upon the particular ſtate of the fluids at the time, by which they may be more or leſs liable to the aſ-

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ſimilating effects of the matter of contagion; and laſtly, that there is no cauſe of doubt that a perſon with the virus in this latent ſtate, and without any external mark of diſeaſe, will communicate the infection to others.

SECTION IV.

Of the Remedies uſed in Lues Venerea.

§ 1. *General Obſervations.*

AS no diſeaſe has engaged more of the attention of practitioners than Lues Venerea, ſo there are perhaps none in which more remedies have been employed. Towards the end of the fifteenth century, when the firſt accurate deſcription was given of this diſeaſe, a great variety of remedies was propoſed for it; and as it

daily increafed in violence till the ufe of mercury was introduced, fcarcely an article in the materia medica was left untried in the fhort fpace which elapfed between this period and the fortunate difcovery of this powerful antidote.

Even long fubfequent to this many new remedies were brought forth; for while mercury feldom fails of curing the difeafe, it was foon found to be productive of many inconveniences. Every country has accordingly been ranfacked, but after all the refearches that have been made, the number of articles employed in modern practice for the cure of this difeafe is very few; and it is thefe only which I now mean to mention. The others, having been found either altogether inefficacious, or comparatively of weak powers to thofe which are retained, have neceffarily fallen into difufe, fo that now it would be confidered as fuperfluous to fpeak of them.

The only antifiphilitic medicines now in general ufe are mercury, guaicum, farfaparilla,

ſaparilla, meſereon, and opium: Of each of which I ſhall ſpeak ſeparately.

§ 2. *Of Mercury.*

I. *General Obſervations upon Mercury.*

Mercury having been long employed for the cure of a variety of herpetic affections, we are not ſurpriſed at finding it early introduced in the treatment of Lues Venerea, in which the moſt obvious of the ſymptoms chiefly affects the integuments of the body. Beſides, as it was univerſally known to be one of the moſt active medicines that had ever been made uſe of, we can eaſily ſuppoſe that practitioners would ſoon be induced to employ it for the removal of a diſeaſe which reſiſted the effects of every other remedy.

Mercury in its crude ſtate is found to be nearly inert, or not capable of producing any active effect, inſomuch that it may be taken into the ſtomach in very conſiderable quantities. It has been ſwallowed to the extent of ſeveral pounds weight, and repeated daily for two or three weeks together with ſcarcely any effect being perceived from it; ſo that wherever it has proved active when uſed in this ſtate, as in a few inſtances has happened, it muſt probably have been in conſequence of its meeting with ſome unuſual degree of acidity in the ſtomach or inteſtines.

This inactivity of mercury in a crude ſtate ſeems to depend entirely upon its inſolubility in the fluids which it uſually meets with in the human body. In this ſtate it either is not abſorbed, or if abſorbed, by not being ſoluble it remains inert.

I ſhall afterwards point out the different means employed for rendering mercury active, and for introducing it into

to the ſyſtem, but previous to this it will be proper to offer a few obſervations upon the ordinary effects of mercury, and upon the different opinions which have prevailed reſpecting its mode of action in curing the venereal diſeaſe.

II. *Of the Effects of Mercury upon the Human Body.*

One of the moſt certain effects of mercury is, that it acts as a cure for the venereal diſeaſe. It ſo ſeldom fails indeed, that when it happens not to ſucceed, as occaſionally is the caſe, we are apt to ſuppoſe that this proceeds either from the medicine not having been properly adminiſtered; from its not having been given in ſufficient quantity; or from the complaints for which it is uſed not being altogether venereal.

Beſides this, mercury is perhaps one of the moſt univerſal ſtimulants with which we are acquainted. Even in ſmall quantities

tities it often excites heat over the whole body, quicknefs of pulfe, and other fymptoms of fever.

It is alfo a very powerful evacuant. Other medicines act with equal certainty upon particular organs, of which we have examples in the effect of ipecacuan upon the ftomach, and of jalap, aloes, and other purgatives upon the inteftines; but we know of none which fo generally affects all the fecretions. Almoft all preparations of mercury will act as purgatives. They alfo produce ficknefs, naufea, and vomiting. They often excite an increafed difcharge of urine; and few medicines operate with more certainty upon the fkin, for they can fcarcely be employed without being productive of fome degree of diaphorefis.

The moft remarkable effect, however, which we perceive from mercury is an increafed difcharge of faliva; and it is perhaps the only medicine which from internal exhibition is known to act with any certainty upon this fecretion. It firft

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excites ſome degree of fœtor in the breath, which is often accompanied with a gentle nauſea, and very commonly with the taſte of copper. The gums become red, full, and ſomewhat tender. The ſalivary glands become hard and turgid, and at laſt an increaſed flow of ſaliva takes place, accompanied with a good deal of pain in chewing, and with a looſe vacilating ſtate of the teeth. For the moſt part this in-creaſed quantity of ſaliva bears ſome proportion to the quantity of mercury that has been exhibited; but this does not always happen, for occaſionally we meet with caſes in which a very great and long continued diſcharge of ſaliva is excited by the ſmalleſt doſe of mercury that is uſually given.

In ſuch inſtances, if the farther exhibition of the medicine be not managed with much caution, beſides a great flow of ſaliva, and ſwelling of the ſalivary glands, a very diſtreſsful tumefaction takes place over all the contiguous parts, and particularly

cularly of the tongue and fauces. This alſo happens wherever mercury is given in too great quantities, and eſpecially if the patient is ſuddenly and unexpectedly expoſed to cold or dampneſs. Where this takes place to any conſiderable degree the whole ſurface of the mouth over all the inſide of the cheeks, the tongue, uvula, and gums, are apt to ulcerate, and the matter which enſues from mixing with the ſaliva gives it both an additional fœtor and an ugly, ſanious appearance.

Beſides the uſual ſymptoms of fever mercury is apt to excite reſtleſſneſs, anxiety, general debility, and a very diſtreſsful irritable ſtate of the whole ſyſtem.

Theſe are the ordinary effects of mercury, and we ſhall preſently have occaſion to ſee that in the treatment of Lues Venerea one of the greateſt difficulties we meet with is the management of this medicine; for while the cure of the diſeaſe often requires it to be given in conſiderable quantities, the conſtitution is apt to be

be materially injured if it be not exhibited with the greateſt care and attention.

III. *Of the Operation of Mercury in the Cure of Lues Venerea.*

Various opinions have been offered of the action of mercury in the cure of this diſeaſe. It would be foreign to our purpoſe, however, to enter minutely into the conſideration of any of them. I mean therefore to make only a few obſervations upon ſuch as have been moſt generally received, and chiefly upon that which in my opinion ought to be adopted.

1. Some have imagined that mercury acts chiefly in the cure of Lues Venerea by exciting a diſſolved or putrid ſtate of the fluids, which they conceive to be a ſtate favourable for the peccant or morbid matter of the diſeaſe being thrown off from the ſyſtem.

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The chief foundation of this opinion is the fœtor which we commonly perceive in the breath of patients under a courſe of mercury, and the increaſe with which it is uſually attended of almoſt all the ſecretions.

When we find, however, that whatever excites a quickened ſtate of the circulation is commonly productive of an increaſe to all the ſecretions, and knowing that a quickneſs of pulſe is a very common effect of mercury, we conclude, that upon this principle this effect of the medicine is more clearly explained than by any other opinion that has yet been ſuggeſted. Beſides, we know from actual obſervation that the blood, during a conſiderable part of a courſe of mercury, inſtead of being thin and diſſolved, is of a more firm texture than it uſually is in health. Mercury, when long continued indeed, never fails to excite much langour and debility, with many of the correſponding ſymptoms of a putreſcent or ſcorbutic diatheſis; but as many of the ſymptoms of ſyphilis

philis are daily cured without this taking place, there is reason to suppose that this effect of mercury upon the system is in no way necessary for the cure of the disease.

In confirmation of this we may remark, that all the slighter degrees of Lues Venerea are often removed, and in some instances cured, without even the saliva being increased in quantity or affected with foetor: nay, a peculiarity of constitution sometimes occurs in which we cannot induce either salivation or foetor of breath by all the mercury that we dare venture to give, and still the cure of the disease goes on, although not so speedily, yet with equal certainty as if these ordinary effects of the remedy had been regularly induced.

2. The symptoms of Lues Venerea being considered by some as the effect of a peculiar irritation excited by the presence of the poison in the system, they have also ventured to say that mercury cures the venereal irritation, as they term it,

it, by producing an irritation of a different kind *.

The reasoning, however, which has been employed in support of this opinion seems to be altogether hypothetical, and directly contrary to many facts which fall daily within our observation in the treatment of this disease.

Local pains may for a time be suspended, or they may even be removed altogether, by irritation of a different kind being excited either in the contiguous or some more distant parts of the body; but we know of no constitutional disease that has hitherto been cured by such means. This affords, therefore, much cause to suppose that the opinion is ill-founded when applied to the action of mercury in the cure of Lues Venerea; for when no such effect is found to take place in other diseases, we cannot, without the strongest proofs were given of it, be led to imagine

* Vide Mr. Hunter's Treatise on the Venereal Disease.

that

that any thing fo very unufual fhould take place here. Mr. Hunter indeed gives as the chief reafon which he fuggefts in fupport of his opinion, that "the difeafe "can in many cafes be cured by raifing "a violent ftimulus of another kind *." I muft fay, however, that I never met with an inftance of this, nor have I been able to hear of any who have done fo; neither has Mr. Hunter, in treating of the method of cure, mentioned any article for the purpofe of curing the difeafe in this manner.

The opinion feems to have arifen from mercury being known to act as a very powerful ftimulant; but although this will be very generally admitted, yet it is alfo well known that this ftimulating effect is not only unneceffary for the cure of Lues Venerea, but that it is one of the moft diftrefsful occurrences that we meet with in the treatment of this difeafe, and that the more we can counteract it, confiftently with the quantity of the medicine to be given, the more certainly do we

* Vide p. 365.

succeed. So evidently is this the case that it may be considered as one of the principal desiderata in this branch of practice, a means of throwing mercury in an active state into the system, and in sufficient quantity for the speedy cure of the disease without producing these stimulating effects. Were we possessed of this the cure of Lues Venerea would be accomplished with ease, and probably in one half of the time that is now found necessary. With the assistance of anodynes we in some degree counteract the stimulating property of mercury, but the most powerful we can employ, even opium itself, is not altogether sufficient; so that we succeed only by exhibiting the medicine in small quantities, and interrupting the use of it altogether whenever it excites much fever, or proves otherwise so powerfully stimulating as to be productive of much uneasiness.

Another obvious proof may be mentioned of this stimulating property of mercury being in no degree necessary for the cure

cure of Lues Venerea. From time to time we meet with conſtitutions in which none of the uſual effects of mercury are ever produced, and yet even in theſe it does not fail of curing the diſeaſe. We have already had occaſion to remark that in ſome neither ſalivation nor fœtor of breath takes place from mercury; but I have alſo met with many in whom it acts with perfect certainty in the cure of Lues Venerea, although it neither tends to quicken the circulation nor to increaſe any of the ſecretions. In all ſuch caſes too the cure is accompliſhed with more eaſe than where mercury operates in the uſual way; and it is worthy of remark, that although all the more acrid preparations of mercury will cure the diſeaſe, yet their ſtimulating properties are found to be ſo hurtful and unneceſſary that almoſt by the univerſal conſent of practitioners they are now generally laid aſide.

We may farther remark, that if mercury acted in the cure of Lues Venerea by the irritation which it excites, other ſtimu-

lants ought alſo to do ſo; but we have not one authenticated inſtance, either of a ſingle ſtimulant or of any combination of medicines of this claſs having ever accompliſhed a cure, and which we cannot ſuppoſe would have been the caſe were the opinion which we are now conſidering well founded.

3. Mercury being ſpecifically much heavier than any of the fluids of the human body, it was a prevailing idea with many that it operated chiefly in the cure of Lues Venerea by its weight. This opinion, however, ſeems to be equally ill-founded with the one we have juſt been conſidering. It has not been found that other articles of equal or greater ponderoſity cure this diſeaſe. It is difficult, or even impoſſible, to conceive that any medicine can prove uſeful merely from its weight; and we have no inſtance properly authenticated of mercury having ever been diſcovered in any of our fluids in a metalic form.

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I may alſo obſerve, that the real weight of mercury that enters the ſyſtem in any caſe of Lues Venerea muſt, for the moſt part, be very inconſiderable. Where the more active preparations of it are employed this is particularly the caſe; but even where triturated mercury is uſed internally, the form now in common practice, we ſeldom find it neceſſary to exceed three or four drachms, and this requiring the ſpace of ſix, eight, or ten weeks, the quantity in the conſtitution at any one time muſt at all times be trifling.

4. The moſt prevalent opinion upon this queſtion at preſent is, that mercury cures the diſeaſe by the evacuations which it excites. This has been ſupported by much ingenious argument; and as it is known that mercury ſeldom exiſts in the ſyſtem without producing an increaſe of one or more of the ſecretions, we need not wonder at the preference which on a curſory view was given to it. I think, however, that it may be eaſily ſhewn that it is

not in this manner that mercury acts in the cure of ſyphilis.

If this opinion were well founded mercury ought to prove uſeful or otherwiſe in proportion to the evacuation which it excites. At one period this was generally believed to be the caſe, and accordingly the greateſt degree of ſalivation that a patient could bear was commonly adviſed; but now that the treatment of ſyphilis is better underſtood, it is univerſally known that this is not neceſſary, nay, in many inſtances that it tends evidently to retard the cure. It happens, indeed, as we ſhall hereafter endeavour to ſhew, that ſome of the more inveterate ſymptoms of Lues Venerea cannot always be cured but with ſuch quantities of mercury as neceſſarily, in a great proportion of caſes, produce ſalivation to a conſiderable height. But we judge that this is merely an accidental property of the medicine, and not neceſſarily connected with the cure of the diſeaſe, from our being able to remove all the ſlighter degrees of it without exciting ſalivation,

livation, and from cures being in some constitutions obtained even of the most inveterate symptoms, without either the teeth, gums, or breath being affected.

Neither does it appear that the power of mercury in promoting any of the other secretions is in any degree useful in the cure of Lues Venerea; at least instances frequently occur in which cures are accomplished without any sensible evacuation taking place. Nay, I have had evident proofs of a cure being retarded by mercury going too freely off by perspiration; and we daily meet with instances of this where it affects the bowels so as to excite diarrhœa.

If mercury acted in the cure of syphilis by increasing the secretions other evacuants ought occasionally to cure it. But no instance of this has happened, while we cannot doubt but that it must have been frequently perceived if any advantage had ever been derived from them. The necessity of promoting one or other

of the ſecretions for the cure of other diſeaſes is ſo frequent, and Lues Venerea ſo often takes place along with other complaints, that every doubt would long ago have been removed. If the opinion which we are now conſidering had been well founded every practitioner muſt have obſerved inſtances of the diſeaſe being cured by diaphoretics, diuretics, &c. but none will probably aſſert that they have done ſo.

We might, *a priori*, ſuppoſe, that ſyphilis cannot be cured by evacuants, but we know from experience that it is ſo, and that they do not even afford relief in any of the ſymptoms. We can eaſily conceive how thoſe diſeaſes that originate from affections of the ſolids, particularly ſuch as are produced by ſpaſm, or ſtricture upon the ſurface, may be much alleviated, or even altogether removed, by the operation of diaphoretics. By removing the cauſe the effect will commonly ſoon ceaſe. But where ſymptoms are induced by contagion in the general maſs

of

of blood, and where this contagion has a power of propagating itſelf, as we have ſhewn to be the caſe in Lues Venerea, it does not appear how they are to be removed by any evacuations. By the uſe of diaphoretics and other evacuants the quantity of fluids in the ſyſtem will no doubt be leſſened, but this will not alter the nature of thoſe that remain: If they were diſeaſed before they will ſtill continue ſo; for it is not alleged that medicines of this nature have the power of diſcharging thoſe parts of the blood that are diſeaſed and leaving ſuch only as are ſound, and yet this would neceſſarily be the caſe if the venereal diſeaſe could be cured by evacuants.

5. Of all the opinions that have yet been advanced concerning the operation of mercury in the cure of Lues Venerea, that which ſuppoſes it to act as an antidote is liable to the leaſt difficulty. This was long ago very univerſally admitted, nor was much doubt ever entertained of

it,

it, till attempts were made by theoretical writers to account for every diſeaſe, and for the operation of every medicine, upon ſuch general principles as are not often applicable in practice. Where principles of this kind are clear and evident they ought certainly to be adopted, but the ſureſt method of having them overlooked in every caſe is to attempt to introduce them in all. By doing ſo abſurdities muſt often be admitted which tend to invallidate the whole, and by which many are led to throw aſide reaſoning in all caſes, who willingly would go into it if our ſyſtems of theory were confined to ſuch queſtions as it is in our power to explain.

Writers of this claſs deny the antidotal power of every medicine merely from their not being able to account for the manner in which they act. They do not conſider that many of the moſt common operations of chemiſtry are equally inexplicable. Thus no perſon can ſay why or in what manner

manner the properties of an alkali ſhould inſtantly be deſtroyed by an acid brought into contact with it. I do not ſay that the operation of mercury in the cure of ſyphilis is analagous to this; but the one I think is equally incomprehenſible with the other, and that mercury acts in this diſeaſe conſiſtently with the idea which we affix to an antidote is at leaſt highly probable. What I conceive to be the property of an antidote, is, that when it comes in contact with the poiſon for which it is appropriated, it either renders it altogether inert or ſo far changes its nature that no dileterious effects are produced by it. Now it ſo happens that we can bring more deciſive proofs of this being the effect of mercury in the cure of Lues Venerea, than we might at firſt imagine would be in our power in accounting for the action of any medicine in the cure of any diſeaſe. Among other circumſtances which tend to eſtabliſh this the following may be enumerated.

1st, We know by experiment that the matter of Lues Venerea on being mixed with triturated mercury is rendered inert, and will not produce the disease. The fact is recorded by the best authority, the late Doctor Cullen, who having supported more ably perhaps than any other person an opposite opinion, we are not to suppose that he would have given room to what militated so strongly against it if he had not been convinced of the fact being well founded. His words are, " A physician took a quantity of matter from a venereal chancre, and mixing it with a a quantity of Plenk's gummy solution of mercury, he applied this mixture to a sound person, but could not find that it produced either chancre or any other syphilitic symptom †." This fact of itself might be judged to be decisive, but more complete conviction is obtained of its being so from every view that we can take of

† Vide a Treatise on the Materia Medica by the late Doctor William Cullen. Vol. II. p. 448.

the

the chief phenomena obſerved to occur from the operation of mercury in the cure of this diſeaſe.

2dly, We have daily evidence of mercury curing venereal ſores not merely by acting upon the diſeaſe in the conſtitution, but on being locally applied to chancres and other ulcers.

In anſwer to this it is ſaid that theſe ſores may be cured by other articles beſides mercury. Allowing this to be the caſe, it is ſufficient for our purpoſe that they are more certainly and more ſpeedily cured by mercurial applications than by any others; a fact ſo notorious that mercury in one form or other is now the chief dreſſing for chancres all over Europe. Copper has been much extolled for this purpoſe, but although I have uſed it in every variety of form it has never proved equal to the different preparations of mercury.

It is alſo ſaid that mercury does not always cure venereal ulcers, which it ought we are told, to do, if it acted as an antidote. This kind of cavil, however, requires

quires no serious answer. We may regret that our medicines will not cure every disease, but all will allow that we are more certain of curing Lues Venerea with mercury than of removing any other disease by any remedy whatever.

3dly, Besides these local effects of mercury upon the matter of Lues Venerea we have the clearest proofs that can be wished for of its acting as an antidote to the virus through the whole progress of the disease. Nay the very practice of those who combat this opinion tends to evince it, although they do not seem to be sensible of its doing so. The first symptom of the disease that commonly succeeds to chancre is bubo, produced, as is now universally known, by the venereal virus being absorbed and lodged in a lymphatic gland. Now it is acknowledged by all who have paid attention to the subject, that our best practice here is to bring the mercury we mean to employ as quickly as possible into contact with the virus lodged in the ob-

obſtructed gland. Nay, of ſo much importance is it that this ſhould be done, that although we may prevent the *ſyſtem* from ſuffering, by throwing the medicine in in a different manner, yet no other practice will prevent the virus from continuing to irritate the obſtructed gland till it is at laſt thrown out by a complete formation of matter. Now in what manner does the mercury act here? It cannot be by diſſolving the texture of the blood, for we have already ſhewn that this does not happen if it be not from a courſe of mercury being long continued, while buboes are often removed by a very ſhort application of it. It cannot be by its weight, for a few grains of it often proves ſufficient; and beſides, it would have in moſt inſtances to act contrary to its own gravity. It is not by exciting irritation, under any kind of modification, for when mercury ſucceeds in reſolving theſe tumours the pain produced by the firſt formation of them very quickly ſubſides, while no irritation of any other kind ever ſucceeds to it.

it. Neither does it act by exciting evacuation; nor could evacuations of any kind be of any avail. The disease is here in a local state: In the formation of bubo the matter does not necessarily enter the system, so that there is nothing to carry off. I therefore think we may fairly conclude that as the action of mercury in the cure of buboes cannot be accounted for in any other manner, and as we find from the testimony of all practitioners that it has no influence in resolving them, but when brought into direct contact with the venereal virus, that it proves effectual only by acting as an antidote to the virus. In my opinion this affords the clearest proof of its doing so that can possibly be given. It even removes the objection that has been stated to the antidotal power which we suppose mercury to exert in the cure of chancres, where it is said that these sores can be cured by other applications; for in the treatment of buboes no practitioner has ever ventured to suppose that they can be resolved by the absorption

ſorption of any other remedy but mercury.

4thly, In tracing the effect of mercury upon the venereal virus ſtill farther we have all along the cleareſt evidence of its acting as an antidote. In the treatment of many of the ſymptoms of ſyphilis, almoſt as ſoon as we can ſuppoſe the mercury to have entered the ſyſtem, the ſame kind of relief is obtained which we experience from this remedy when it proves ſucceſsful in reſolving buboes. This is particularly the caſe in the venereal ſore throat, where a good deal of uneaſineſs generally prevails till mercury is given, and in which much relief is commonly obtained ſoon after it is employed, without any other irritation being excited, and often before the medicine has produced any evacuation whatever.

5thly, We conclude that the relief experienced from the internal uſe of mercury in the treatment of local venereal

symptoms proceeds from the medicine coming in contact with the virus, in the first place, from our finding, as I have just observed, that it is analogous to what happens in the cure of buboes, where we know that the mercury is directly applied to the virus; and secondly, from our having convincing proofs of the medicine entering the circulation almost in every case in which it proves successful, and therefore that it must be applied to every part that is diseased. Some indeed have alleged that mercury never enters the circulation. In a metallic form this may perhaps be the case, but that the essential parts of it pass into the system is obvious, not merely from its influence in curing diseases, but from the taste which it gives to the saliva, although it be absorbed at a distant part of the body; and from the effect produced by the exhalation of a person under mercury upon gold and silver carried in the pocket, which is exactly similar to that which occurs from mercury being rubbed upon these metals.

6thly,

6thly, It has been ſtated as an objection to this opinion, that the quantity of mercury employed for the cure of Lues Venerea is ſo ſmall that it is difficult to conceive how it can have any influence upon the general maſs of blood, to which it bears ſuch a ſmall proportion. To obviate this difficulty an ingenious opinion has been offered. As we perceive the venereal virus to produce effects chiefly upon particular parts, it is ſuppoſed that all that exiſts of it in the maſs of blood may be thrown out upon or be attracted by theſe parts, and therefore that the mercury employed in the cure, inſtead of acting upon the general maſs of blood, may be ſuppoſed to exert all its influence upon the diſeaſed parts only *.

I think it more probable, however, from many of the phenomena of the diſeaſe, and it muſt undoubtedly be ſo if

* Vide Obſervations on Mercury, by Dr. Andrew Duncan, profeſſor of medicine in the univerſity of Edinburgh.

the opinion I have endeavoured to ſupport be well founded, that the whole maſs of blood is tainted in an equal degree while any part of the contagion remains in the conſtitution, and that the mercury employed in the cure acts equally upon every part of it. We know that the diſeaſe itſelf may be produced by a very ſmall particle of matter. We may juſt as readily ſuppoſe therefore that it may be cured by a ſmall quantity of any remedy that acts as its antidote; and it is perhaps equally difficult to explain the manner in which ſuch a ſmall portion of matter acts in aſſimilating quickly to its own nature ſuch a large proportion of our fluids, as it is to account for the manner in which the mercury operates which we employ for curing the ſymptoms produced by it.

Upon the whole, therefore, as the action of mercury in the cure of Lues Venerea is not accounted for by any other opinion that has yet been offered; as we have complete evidence of this diſeaſe being at all times the effect of contagious matter

matter entering the blood; as the local effects of this matter are cured by mercury, whether they appear in the form of ulcers or by obstructing the lymphatic glands; as no other remedy hitherto employed operates with any certainty, either in removing the matter from the blood, or in obviating the effects of it; as mercury seldom or never fails in curing syphilis, when it can be made to enter the blood, if it be not in the most advanced stages of the disease, or when Lues Venerea is connected with other diseases, or with such peculiarities of constitution as will not bear a sufficient quantity of mercury; and as no instance perhaps can be adduced of a cure being accomplished where the presence of mercury in the blood was not rendered obvious either by the usual effects of it upon the mouth or upon gold and silver carried in the pocket, we have no reason to doubt of this remedy operating perhaps entirely as an antidote; that is, by rendering the matter of contagion inert or incapable either of ex-

citing the diſeaſe, or continuing the ſymptoms even after the diſeaſe has been produced.

IV. *Of the Preparations of Mercury.*

We have already had occaſion to obſerve that crude mercury is not ſoluble in any of the fluids which it uſually meets with in the human body; and as no effects reſult from it while it remains in this inſoluble ſtate it has been conſidered as a very important object to prepare it in ſuch a manner that it may with moſt eaſe and ſafety be introduced into the ſyſtem in a ſoluble form. It unfortunately happens, however, that all the active preparations of mercury, I mean ſuch as prove effectual in curing the venereal diſeaſe, are apt to excite very diſagreeable ſymptoms, particularly ſalivation to a diſtreſsful height, purging, and general debility. Scarcely any point in practice has therefore met with more attention than the

the different methods of exhibiting mercury. Regular practitioners have in all countries been anxious to render mercury at the same time active and safe, while it has been the pride of every empirick to be able to boast of some new discovery by which this remedy may be given with freedom and safety without being deprived of any of its essential properties.

The preparations of mercury are accordingly very numerous: upwards of five hundred might be enumerated. The consequence of which is, that much doubt and uncertainty has taken place concerning them; for while one preparation has been in common use with some practitioners we find it entirely neglected by others; and in some countries preparations of mercury are employed daily which in others are very generally condemned.

This would lead to the conclusion of our being able to cure the disease with perhaps equal ease and safety with a great variety of these preparations, and this I believe to

be in ſome meaſure the caſe. We are very apt to fall into a routine of practice, from which it is with ſome difficulty that we emerge, and which therefore every practitioner ought early in life to guard againſt. In no inſtance is the want of attention to this more conſpicuous than in our practice in Lues Venerea, where the ſame practitioner very commonly perſiſts in the ſame method of exhibiting mercury, and is therefore ſoon induced to ſuppoſe that no other is equal to it, whereas were he to make trial of others he would find many by which the diſeaſe can be cured with equal eaſe, expedition, and certainty. To enumerate all the prepartions of mercury that have been employed could anſwer no good purpoſe; and being unneceſſary, the attempt would be improper. I ſhall ſhortly mention, however, all ſuch as are in general uſe, with the views which practitioners have in giving a preference of one to the other.

It is found by experience that mercury may be rendered ſoluble, ſo as to prove active

active when received into the fyftem, by three different proceffes; by trituration; by calcination; and by folution in a variety of acids.

Whether any property is communicated by any of thefe proceffes to mercury which it did not before poffefs it may be difficult to determine. It would appear that they render mercury active nearly in proportion to the degree of folubility which they give to it; and this again feems to depend in a great meafure upon the degree of feparation produced by thefe proceffes between the different particles of the mercury: At leaft this is clearly the effect of trituration. We have feen that in a crude ftate this metal is altogether inert; and we find by experience that it proves active in proportion to the trituration employed upon it; and as by calcination and folution it is rendered ftill more active than it can be made by triture alone, we conclude that thefe proceffes are better calculated

for

for producing a more complete divifion of its particles.

By agitation alone mercury may be reduced to the ftate of a powder, as was firft attempted by Doctor Boerhaave, and afterwards by the very ingenious Doctor Saunders of London; but the length of time required for this being very confiderable, practitioners have been accuftomed to triturate the mercury with fuch fubftances as tend more effectually to keep the particles of the metal feparate from each other, by which, while the virtue of the medicine is not leffened, the procefs for obtaining it is much fhortened. This, accordingly, is the foundation of various active preparations of mercury, of which the following are in moft frequent ufe.

I. Where the mercury is triturated with unctuous fubftances, and ufed externally only, as is the cafe in the emplaftrum hydrargyri of the London and Edinburgh difpenfatories, and in the unguentum hydrargyri vel mercuriale.

II. Where

II. Where it is triturated with gums, mucilages, and faccharine fubftances, and chiefly employed for internal ufe, as in the pilulæ hydrargyri pharm. Lond. and Edin.; in the folutio mercurialis gummofa of Plenk; in the injectio mercurialis; and mel mercuriale.

III. Where it is triturated with dry calcareous powders, fuch as crabs eyes, and prepared chalk, forming what is ufually termed mercurius alkalifatus *.

Befides thefe, mercury might be triturated with feveral other fubftances with perhaps equal advantage. Sulphur alone feems to render it inert, or nearly fo. The more friction that is employed upon mercury mixed with any other fubftance the more active it becomes, while the more that it is rubbed with fulphur the more inert it is rendered.

* Prefcriptions for each of thefe, as well as for the preparation of every other article which I fhall have occafion to mention, will be given in the Appendix.

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A very active preparation of mercury is obtained by means of heat: it is termed mercurius calcinatus, and is the basis of different pills and powders. In this process the mercury is reduced to a calx by long exposure to a very considerable degree of heat.

Mercury is found to be more or less soluble in every acid, and the calx or salt obtained from these solutions gives the most active form of the remedy with which we are acquainted.

1st, Mercury combined with the muriatic acid gives, by different processes, the mercurius sublimatus corrosivus, or hydrargyrus muriatus corrosivus; and mercurius dulcis, calomel, or hydrargyrus muriatus mitis; from the first of which are prepared the solutio mercurii spirituosa of Van Swieton; the aqua phagadenica and other watery solutions of corrosive sublimate of different authors, and pilulæ e mercurio corrosivo. From the latter, viz. mercurius dulcis, are prepared a variety of

of active formulæ both for internal and external use; but these differing only in the vehicles by which they are conveyed it is not necessary to enumerate them here.

2dly, With the acid of nitre, from which is prepared mercurius precipitatus ruber, the basis of various external applications; unguentum hydrargyri nitrati mitius, vel unguentum citrinum; and the pulvis mercurii cinereus.

3dly, With the vitriolic acid, with which we prepare turpethum minerale.

4thly, With the acid of vinegar, from which is prepared Keyser's pills; analogous to which is the terre feuilleté mercurielle of Preslavin, prepared with mercury dissolved in the acid of tartar.

Mercury has also been dissolved in the acids of lemons, sugar, borax, arsenic, and spar; and in a greater or lesser degree it is soluble, as I have already observed, in per-

haps

haps every acid; but as every uſeful purpoſe of the medicine may be obtained from one or other of the foregoing forms, it appears to be unneceſſary to enumerate more, particularly, as thoſe who wiſh for farther information will readily obtain it in the various Diſpenſatories publiſhed in different parts of Europe.

It may here be proper to remark, that although all of theſe preparations are in appearance different from each other, yet all of them ſeem to have nearly the ſame effect upon the mercury. They tend all to reduce it to the form of a calx, and in proportion as the calcination is compleatly accompliſhed the medicine becomes active or otherwiſe. Even the trituration of mercury has the effect of reducing it to the ſtate of a calx, and it is obviouſly in this manner that it is acted upon by acids; for when diſſolved in acids, and the ſolution evaporated, nothing but a pure calx is obſerved to remain.

But although all of theſe preparations of mercury ſeem to be more or leſs active accord-

according as the calx which they produce is more or lefs perfect, there is however fome manifeft difference in the calces obtained from them. All of them produce the diftinguifhing characteriftics of mercury upon the fyftem: they cure the venereal difeafe, and they excite falivation; but this is done much more eafily, and with lefs diftrefs in the operation, by fome of thefe than by others.

Of all the preparations of mercury thofe produced by triture alone feem to be the beft for general ufe. They cure the venereal difeafe with the fame certainty as the others, and they are not fo apt to affect the ftomach and bowels; although the faline preparations of mercury, when the acid with which they are combined is compleatly feparated from them, may, under proper management, be given with perfect fafety, and with equal certainty of curing the difeafe. Corrofive fublimate mercury, as it is termed, is one of the moft acrid of all the mercurial calces,

calces *, inſomuch that ſcarcely any perſon can bear it in the doze of a grain, and in the quantity of a very few grains it acts as a poiſon; but even this very acrid remedy is rendered ſo mild by being deprived of the acid with which the mercury is united, that in the form of calomel it may with ſafety be given to the extent of ſeveral grains at once †. We find alſo that the ſaline calces of mercury prove in ſome degree acrid in proportion to the ſtrength of the acid with which they are combined; hence all the combinations of mercury with the muriatic acid, with the acid of nitre, and the vitriolic acid, prove much more acrid than the calces obtained from mercury united with the acetous acid, or acid of tartar. It is therefore probable that if theſe preparations of mercury could be entirely deprived of their ſaline combinations, that they would not differ in any material

* Vide Appendix, No. 8. † Vide No. 9.

point

point from the preparations obtained of this metal by triture.

As yet however we have not been able by any procefs to which they have been fubjected, to prevent them from operating very differently upon the human body, according to the kind of acid with which they are prepared. Thus, while fimple triturated mercury acts chiefly upon the falivary glands, mercurius fublimatus corrofivus is more apt to act as a diaphoretic, and it readily excites naufea and vomiting. The fame preparation again, when more completely deprived of its acid, does not feem to affect the fkin, nor in fmall dofes does it fo readily injure the ftomach, while it acts with more certainty as a purgative. Indeed calomel, in proper dofes, is perhaps one of our fureft purgatives; and in order to act upon the falivary glands it muft either be given in fmall dofes, frequently repeated, or combined with opium or fome other aftringent. The mercurius cinerius is alfo apt to affect the bowels, while the combination

tion of mercury with the vitriolic acid in the form of Turbeth's mineral, or hydrargyrus vitriolatus flavus, chiefly operates upon the ftomach.

It is proper that in practice thefe different actions of the preparations of mercury fhould be kept in view; for although all of them, as I have obferved already, will, under proper management, cure the venereal difeafe, fome advantage is occafionally obtained from adapting them as much as poffible to the nature of the fymptoms for which they are intended. Thus, when a mercurial emetic is wifhed for, we give Turbeth's mineral; calomel is always given as a mercurial purgative; and in particular affections of the fkin corrofive fublimate appears in fome inftances to fucceed where other preparations of mercury have failed.

V. *Of*

V. *Of the different Methods of exhibiting Mercury.*

In the cure of Lues Venerea, mercury, in every form, acts either locally upon particular ſymptoms or it enters the ſyſtem and cures the diſeaſe of the conſtitution. We ſhall afterwards have occaſion to ſpeak more particularly of the treatment of local affections; at preſent we ſhall attend chiefly to the different methods of throwing mercury into the ſyſtem.

Three different methods have been employed for exhibiting mercury; by conveying it in the form of fumes; by taking one or other of the preparations of mercury into the ſtomach; and by applying them to the ſurface of the body.

The fumes of mercury are applied to the body by burning different mercurial calces in the patient's chamber. By thus breathing, as it were, a mercurial atmoſphere,

phere, and having the fumes equally applied to every part of the surface of the body, the usual effects of mercury upon the system are soon produced, more quickly perhaps than by any other method. Cinnabar is commonly employed for this purpose; but Turbeth's mineral, with the addition of sulphur, and Æthiop's mineral, answer equally well.

Where it is meant to raise a salivation suddenly, or to throw mercury quickly into the system, this is perhaps the surest method of doing it; for with the fumes of mercury a salivation is sometimes excited in the course of a few hours. This brought the practice into much reputation when salivation alone was considered as the chief part of the cure; but now when it is known that Lues Venerea may be cured without much salivation being excited; that the more gradually mercury is thrown into the system the more effectually it operates; and that very violent effects are sometimes produced by fumegating

gating with mercury, the practice has of late been very generally laid aſide.

I think, however, that it may occaſionally be employed with advantage; and in different inſtances I have found this to be the caſe. I will not ſay that it ought ever to come into general practice, but I am clearly of opinion that it ſhould not in all caſes be laid aſide. The fumes of mercury being applied to venereal ſores will ſometimes forward a cure when every other preparation has been tried in vain; and I have met with a few caſes in which the mercury either went off too rapidly by ſtool when taken into the ſtomach, or where it was not abſorbed if applied in the form of unction to the ſurface of the body, and in which it ſoon proved effectual when uſed in this manner. It is particularly uſeful where venereal ſores are ſeated on parts of much importance; and where, from making a rapid progreſs, there is cauſe to dread that they may prove hazardous. In ſuch circumſtances we ſeldom fail in giving a ſudden check

to the fymptoms by fumigating with mercury; but this is perhaps all that we fhould expect from it. It is obvioufly of a more fubtile nature than any other mercurial application. It therefore enters the fyftem more readily; but the effects produced by it are not ufually permanent. By a proper application of the fumes of mercury fores may be healed fpeedily, and the pains induced by venereal nodes very completely removed, and yet the difeafe will return in full force if this practice alone fhould be trufted. When therefore it is judged proper, for the reafon I have given, to employ mercury in this manner, and when the fymptom for which it was employed is checked, the cure fhould be completed by fome other preparation, whofe effects, although flow are more permanent, as very generally happens both from a proper application of mercurial ointment and from the internal exhibition of the common mercurial pill. In this manner much benefit may be derived from a remedy which feems to have been

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laid aſide without any ſufficient reaſon, and from our truſting to it alone when others ought to be given along with it.

The fumes of mercury may alſo be applied with ſafety. They appear to prove hurtful chiefly when received in too great quantity into the lungs, but this may eaſily be prevented by burning a ſmall quantity at once; and we may even confine the ſteam to the ſurface of the body, or to any particular part of it. Such boxes as are employed for confining the ſteam in vapour baths anſwer the ſame purpoſe here.

We have daily proofs of mercury entering the ſyſtem by being abſorbed from the ſtomach and inteſtines; but this mode of exhibiting the remedy is liable to one very important difficulty. Every preparation of mercury that has yet been invented is apt to irritate either the ſtomach or bowels, by which they not only excite ſickneſs and purging, but by depriving the patient of appetite he ſoon becomes much emaciated and debilitated. When

pushed far indeed the effects of mercury given in this manner are in some instances very distressful. The stomach becomes so much weakened that any food taken into it is either immediately rejected or remains undigested, and the bowels are so entirely deprived of their tone that they seem to lose all power of retention. Even when completely emptied a degree of tenesmus often takes place, from which a great deal of misery is often experienced.

The preparations of mercury which do least injury to the stomach and bowels are those, as I have already observed, that are obtained by agitation or triture; but even they prove frequently troublesome, and require always a good deal of management. They should never be given in large doses; and as soon as any degree of irritability is induced by them, either in the stomach or intestines, an opiate should be given along with them. Of these preparations, the best and most convenient form is the blue pill of the Edinburgh dispensa-

penſatory, of which four grains of the maſs, which contains one grain of mercury, being given three times a-day, will in moſt inſtances affect the mouth in a very ſhort time. Some conſtitutions indeed require more, but this ſeldom happens where the mercury has been ſufficiently triturated. Wherever much more than this has been given the mercury either has not been properly triturated or we may conclude that much of it has paſſed through the inteſtines without being abſorbed, or that the conſtitution of the patient reſiſts this effect of mercury.

Mercurius alkaliſatus, and Plenk's ſolution of mercury in mucilage of gum arabic, are nearly of the ſame nature with the blue pill, but they are both more apt to purge, particularly the latter, notwithſtanding of all that Plenk the inventor has ſaid to the contrary. When properly prepared no more mercury ſhould be given in either of theſe formulæ than in the mercurial pill; and as a much greater quantity is commonly directed, this can only

only proceed from neither of the preparations being made with ſufficient exactneſs, and from much of the mercury which they contain being left altogether inert by not being duly triturated.

Many will be ſurpriſed at the ſmall doſes of theſe articles which I have mentioned here, as more than double of this is commonly given. It is not uncommon to adviſe ſix, ſeven, or eight of the blue pills daily; and twenty grains of mercurius alkaliſatus is recommended for a doſe *. Now I know from daily experience that the blue pill when properly prepared cannot be given in this quantity. I ſeldom give more than two pills a day, and very rarely above three; and in each pill, as I have obſerved, there is exactly one grain of mercury. But the maſs from which theſe are formed is prepared with much attention: They are triturated ſix or ſeven hours daily for thirty or forty

* Vide Mr. Hunter's Treatiſe on the Venereal Diſeaſe.

days;

days; and when the mercurius alkalisatus is properly prepared it proves equally powerful; but it is so difficult to separate the particles of mercury when rubbed with a dry powder, that this preparation is now very generally laid aside. It requires to be rubbed for at least one hundred days, in order to bring all the mercury into a state of activity.

Some are of opinion that mercurius calcinatus is equal in its effects to any of these preparations †. The dose is a grain or two evening and morning, either in the form of a pill or powder. It will certainly cure the disease, and it puts a stop to the symptoms perhaps as soon as any other form of mercury; but I have sometimes thought that its influence is not so permanent; that is, the symptoms have been more apt to recur after a sufficient quantity of this medicine was supposed to be given. But so many facts are requisite to ascertain this that I cannot speak

† Vide Appendix, No. 7.

decisively about it. From all that I know of it, however, it does not appear to be equal to the blue mercurial pill. The ease with which it is prepared seems to be the only circumstance in which it has a preference; but this is a point of little moment when put in competition with utility. Any tendency which it has to act upon the stomach and bowels may for the most part be checked by the addition of a small quantity of opium.

Hydrargyrus muriatus corrosivus, commonly termed corrosive sublimate, when it does not affect the stomach, proves frequently a very useful medicine. It was never generally employed for internal use till the celebrated Van Swieton brought it into repute. It has since been much used in almost every part of Europe; and being easily disguised, and not so apt to salivate as other preparations of mercury, it has formed the basis of almost all the quack medicines that has of late been employed for the cure of this disease.

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The form of uſing this medicine by Van Swieton is, however, the moſt nauſeous of any. He adviſes it to be diſſolved in ſpirits, and one or two ſpoonfuls, containing from a quarter to half a grain of mercury, or even more, is commonly given evening and morning; and this is directed to be continued till a cure is accompliſhed *. Few can bear it in this manner; for it not only affects the ſtomach, but in this quantity it is apt to excite diarrhœa. Neither can it be with ſafety given in powder, as it is not eaſily levigated ſo finely as to prevent it from acting mechanically upon the ſtomach. The beſt form of uſing it ſeems to be in a watery ſolution, and this may either be given in a mucilaginous mixture or mixed with broths, or the ſolution may be made into a maſs with crumb of bread wheat-flour, or flour of liquorice, and divided into pills †. Inſtead of giving it in lar-

* Vide Appendix, No. 10.

† Vide Appendix, No. 19.

ger

ger doſes evening and morning, it anſwers better to give the ſame quantity divided into four or five doſes. A grain of mercury may in this manner be given daily, that is, a quarter of a grain four times a-day. Some have adviſed more, but this is the largeſt doſe that I have ever been able to continue for more than two or three days together.

Opiates have not the ſame influence in preventing corroſive ſublimate from acting upon the ſtomach and bowels which they commonly have with other preparations of mercury. I have found nothing ſo effectual for this purpoſe as decoction of guaicum and meſereon, or plentiful dilution with mucilaginous drinks and broths. Theſe may act in the firſt place by ſheathing the ſtomach and bowels directly from the effect of the medicine ; and they may alſo prove uſeful by promoting the natural tendency which this form of mercury ſeems to have to paſs off by the ſkin.

Mercurius dulcis, or calomel, is given by ſome in large doſes for the cure of ſy-

ſyphilis, even to the extent of ten grains daily *. I have not found, however, that this is neceſſary, and it very commonly proves injurious both to the ſtomach and bowels. It anſwers better in doſes of a grain repeated three times a day, by which it more readily enters the blood than when given in larger quantities, and is leſs apt to be carried off by ſtool.

This form of mercury has long been in general uſe, and there cannot be a greater proof of its ſafety and utility than its being ſtill preferred by many of our beſt practitioners. When as completely deprived as poſſible of its acid, I believe it to be one of our beſt ſaline preparations of mercury. In this ſtate it commonly operates mildly, and is equally powerful with any other form of the medicine in curing the venereal diſeaſe.

Mercury in this form is beſt given in a bolus, in pills, or in powder, for it is ſcarcely in any degree ſoluble in water, and it is ſo heavy that watery fluids do

* Vide Appendix, No. 9.

not

not ſuſpend it, ſo that it cannot eaſily be given in a mixture.

The pulvis mercurius cinereus is another very uſeful preparation of mercury *. It alſo requires to be given in a ſolid form. The doſe is two, three, or four grains evening and morning. Some have adviſed more, but I have not found that in common practice more can with ſafety be given.

Hydrargyrus vitriolatus flavus, or turpethum minerale, is particularly apt, as I have already obſerved, to act upon the ſtomach; but even this form of mercury may be ſo given as to cure the venereal diſeaſe and yet prove ſufficiently mild in its operation †. In doſes of five, ſix, or ſeven grains it acts as a violent emetic, but it may with ſafety be given to the extent of a grain, two or three times a day, particularly if each doſe be conjoined with half a grain of opium.

* Vide Appendix, No. 15.

† Vide No. 16.

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Hydrargyrus acetatus, or mercury combined with the acid of vinegar, is certainly more mild in its operation than any of the other ſaline calces of mercury; nay, it does not derange the ſtomach and bowels ſo much as triturated mercury is frequently found to do; but from all the trials that I have made of it, I do not conſider it as equally certain in curing the venereal diſeaſe. The ſymptoms abate while the patient is under it; but if ſome other preparation of mercury is not employed either along with it or continued afterwards, they are very apt to appear again ſoon after it is laid aſide.

I have judged it proper to take this particular notice of all the preparations of mercury now generally employed for internal uſe; and from what I have ſaid, it will be obvious that ſome of them are for ordinary purpoſes preferable to others. In common practice, the preparations of mercury obtained by triture, and particularly the blue mercurial pill, will be found to be the beſt. But as caſes ſometimes oc-

cur which do not readily yield to any one form of medicine, we are under the neceſſity of having recourſe to others; and from what we have already had occaſion to remark, the choice may be readily determined. We ſhall beſides have farther opportunities of ſpeaking upon this point when we came to treat of the cure of the different ſymptoms of the diſeaſe.

But although we may in a great proportion of caſes be able to cure the diſeaſe by one or other of theſe forms of mercury, and in moſt inſtances without any injury to the conſtitution, yet we find that even the mildeſt preparation we can employ, and under whatever caution it may be given, is occaſionally apt to affect both the ſtomach and bowels in ſuch a manner that we are under the neceſſity either of giving it in too ſmall quantities for the purpoſe of curing the diſeaſe, or of laying it aſide perhaps entirely, in order to make trial of the medicine in ſome other form.

Our

Our ſureſt method of obviating this effect of mercury is to apply it to the ſurface of the body only, a practice which ought as much as poſſible to be adopted, and to which the chief objection is, the trouble of applying it. The advantages, however, which attend it are ſo great that every objection of this kind ſhould as much as poſſible be made to give way to it. A patient may be ſo ſituated that he cannot uſe the medicine in this way; and inſtances occur occaſionally in which the mercury is not readily taken up by the abſorbents on the ſurface of the body. In both of theſe caſes we are under the neceſſity of giving it inwardly; but ſcarcely any other good cauſe can occur for it. Nor would either of theſe be frequent if the advantages of the practice were ſufficiently explained to our patients, and due attention given to the proper application of the mercury. It ſometimes indeed happens that mercury does not eaſily enter the ſyſtem in any form, and does not in the uſual time affect either the ſali-

vary or other excretory organs. In ſuch caſes, where the ſymptoms of the diſeaſe are urgent, we ſhould not be confined to any one method of cure, and the medicine ſhould be given in every form in which it is likely to prove uſeful; but it is proper to remark, that failures of this kind are much more frequent from the internal exhibition of mercury than from the outward application of it, and which is another important advantage that we derive from uſing it in this manner. Different reaſons indeed may be mentioned for this being the caſe; the readineſs with which mercury given by the mouth is carried off by ſtool; the great quantity of food with which it is often mixed in the ſtomach, and by which we may ſuppoſe that a conſiderable part of the ſmall quantity that we dare ever venture to give in this manner is prevented from coming into contact with the abſorbents of the inteſtines; and laſtly, the great extent of ſurface to which we can apply it externally.

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By ſome it is alledged as an objection to this mode of uſing mercury, that we cannot exactly aſcertain the quantity that enters the ſyſtem. This, however, holds equally ſtrong againſt every way in which we can give it, nor is it a point of any importance. It is not ſo much by the quantity we employ, as by the effects which reſult from it, that we ought to be directed. The uſual effects of mercury upon the mouth, and in the cure of the different ſymptoms of the diſeaſe, will, with ſome patients, take place from half the quantity of the medicine required by others; but were it an object of much more importance than it appears to be, I do not ſee how the quantity of active mercury entering the ſyſtem, in any way we may uſe it, can be aſcertained.

It is alſo mentioned as an objection to the external uſe of mercury, that it is more apt to excite ſalivation than when given by the mouth. This, however, is not ſo much an objection to the practice as to the mode of conduct-

ing it. Mercury ufed in this manner enters the fyftem for the moft part fo readily, that thofe who have not been accuftomed to prefcribe it, are no doubt apt to be deceived with it. It proceeds quickly to the falivary glands, and is thus more apt to excite fudden falivation than when taken into the ftomach; but this proceeds altogether from inattention, and may always be prevented by applying the mercury in fmall quantity at firft, and increafing it according to its effects. Our being able to affect the fyftem more fpeedily by the external application of mercury fhould be confidered as another advantage of this mode of exhibition; for the fymptoms of fyphilis in fome inftances advance fo rapidly that it is an object of importance to check them as quickly as poffible. Salivation appears to be the effect of a certain quantity of mercury in the fyftem, in whatever way it is introduced. Some of the more acrid preparations pafs off indeed more readily by other emunctories, but the milder forms of the medicine, and which

which I have endeavoured to ſhew ought in moſt inſtances to be preferred, are equally ready to excite ſalivation. It is true that more time is required to throw the quantity into the ſyſtem that is neceſſary for this purpoſe by one mode than by another, but when this quantity is introduced the effect of the mercury upon the glands of the mouth is uniformly the ſame in whatever way it is accompliſhed.

Upon the whole, therefore, all the objections that have been made to this method of exhibiting mercury are trifling when compared with the advantages it poſſeſſes over every other mode of uſing it, ſo that for general practice it ought to be preferred.

I own indeed that at one period I was of a very different opinion upon this point; but this proceeded from my not being ſo well acquainted with the ſuperior advantages of uſing mercury in the form of unction as I now am, and which I now therefore very generally prefer.

Mercury will paſs into the ſyſtem in various forms from the ſurface of the body. Lues Venerea has been cured by frequent immerſions of the feet and legs in a ſolution of corroſive ſublimate. The application of a mercurial plaiſter to the ſurface of the body, if of any conſiderable extent, will alſo cure the diſeaſe; and we are indebted to Mr. Clare of London for a third method of throwing mercury into the ſyſtem from the ſurface *. By rubbing calomel into the inſide of the cheeks Mr. Clare found, and his obſervations have in ſome degree been confirmed by experience, that we can not only excite ſalivation by this means, but cure every ſymptom of ſyphilis. Nay, the rubbing of a few grains of calomel upon the inſide of the preputium or labia pudendi ſoon affects the ſyſtem and excites the mercurial fœtor in the breath and ſoreneſs of the gums. But

* Vide an Eſſay on the Cure of Abſceſſes by Cauſtic, &c. alſo a New Method of introducing Mercury into the Circulation, by P. Clare, Surgeon.

although

although I have found this in ſome inſtances to be true, the practice has alſo in ſeveral of the trials I made of it failed entirely; that is, it did not cure the ſymptoms for which it was employed, and which were afterwards removed by other preparations of mercury. I muſt own, however, that the experience I have yet had of this method of uſing mercury does not entitle me to ſpeak deciſively concerning it; but I conclude either that ſimilar failures, or ſome other objections of importance, have occurred to it in the practice of others, for we do not now hear that it is employed, although Mr. Clare's book has been publiſhed upwards of twelve years.

One obvious cauſe of this, and of the other modes I have mentioned of applying mercury externally, falling into diſuſe is, that all of them ſeem to be much inferior to the method of introducing it in the form of an ointment, and which was the firſt, I may obſerve, that was employed for the cure of Lues Venerea. It

is commonly termed the method of cure by unction, or inunction.

An ointment for this purpose may be made with different proportions of mercury; but the best I have tried is that in which there are two parts of the unguent to one of crude mercury. In the form commonly used the ointment and mercury are in equal parts; but the other, while it proves equally powerful, if it be applied over a greater surface, has the advantage of not being so apt to irritate the skin.

In order to promote the absorption of the mercury it has been the practice with many to advise the body to be immersed in a warm bath, once and again, before the course is commenced, and to repeat it once or twice a week during the whole continuance of it. They likewise think that the bathing proves useful by giving the mercury a particular determination to the skin, and thus preventing it from producing salivation. I have not found, however, that a frequent use of the warm bath

bath is neceſſary. It cannot in every ſituation be obtained but with much difficulty, and if not very properly conducted it is apt, during a courſe of mercury, to expoſe the patient to ſuffer from the effects of cold. Before the commencement of the courſe, where the ſkin is particularly dry, I have ſometimes thought it right to adviſe the uſe of a warm bath, but as in other inſtances of a ſimilar nature the remedy has anſwered equally well where this precaution was not taken, I do not conceive that it is of much importance, and I now ſeldom employ it.

Where the remedy is chiefly employed for the removal of a local affection, ſuch as bubo, we endeavour to make it paſs through the lymphatic veſſels of the part, and in ſuch caſes this determines the place to which the ointment ſhould be applied; but where no local ſymptom of this kind takes place, it may be applied with equal ſafety and propriety to any part of the body, and the place of application ſhould be changed from day to day. By this means

means we obviate the irritation of the ſkin, which is apt to happen from applying it repeatedly to the ſame place, at the ſame time that we promote the abſorption of the mercury. I may alſo remark, that although, for the reaſons I have given above, it does not appear to be neceſſary to immerſe the whole body in a warm bath during a courſe of mercury, yet that ſome advantage is occaſionally derived from cauſing the parts upon which the ointment has been rubbed be well bathed with ſoap and water before repeating it upon the ſame place. It may therefore be proper to adviſe this to be generally done.

In applying the ointment, ſome have imagined that we need only lay it upon the ſkin, and that it will enter the abſorbents with equal certainty whether friction is uſed or not. This, however, is by no means the caſe. I have repeatedly put it to the teſt of experiment, and it evidently appears that abſorption is promoted by gentle friction. This indeed is ſo con-

confonant to general experience, that fome may be furprifed at my taking notice of it, nor would I have judged it neceffary if the contrary opinion had not of late been fupported by authority of fome weight.

When the patient is able, the friction fhould be applied with his own hands: Otherwife it muft be done by an affiftant, his hands being covered with a thin bladder. For want of this precaution, the affiftant is apt to be falivated while the patient is deprived of a portion of the mercury. According to the nature of the cafe, from a drachm and a half to two drachms of the ointment fhould be rubbed in daily, and it anfwers better to apply it at two different times than all at once. For the purpofe of applying properly this quantity of ointment, that is from forty-five grains to a drachm, twenty or twenty-five minutes of gentle friction is neceffary, the patient while under it being expofed to the heat of a moderate fire.

VI. *Of*

VI. *Of the Duration of a Mercurial Courſe; and the Quantity of Mercury to be exhibited.*

In the preceding parts of this ſection I have enumerated the different preparations of mercury which chiefly merit attention, with the doſes of each, which may with ſafety be employed. I am now to offer a few obſervations upon the quantity of mercury to be given, and the length of time to which a courſe of this medicine ſhould extend; queſtions of the firſt importance in the treatment of the venereal diſeaſe.

As ſalivation is one of the moſt obvious effects of mercury, practitioners began very early to imagine that the morbid matter of Lues Venerea was carried off in this manner; and at laſt it was generally believed that a cure could not be obtained if a very conſiderable diſcharge of ſaliva did not take place. In conſequence of this

this every patient labouring under Lues Venerea was made to ſalivate; and as it was thought to be of importance to have this quickly accompliſhed, mercury was immediately applied in the moſt effectual manner for this purpoſe. It was either preſcribed in large doſes, and theſe frequently repeated by the mouth, or frictions with ſtrong mercurial ointment were applied over the legs and arms, and in ſome inſtances even over the whole body.

In this manner the ſyſtem was very quickly charged with as much mercury as it could bear, and for the moſt part a cure of all the ſymptoms was no doubt effected: But the ſudden manner in which this great quantity of mercury was introduced, and the violent evacuations which it excited, together with the low regimen with which it was commonly accompanied, reduced even the ſtrongeſt conſtitutions to a degree of debility from which they ſeldom entirely recovered; ſo that a great proportion of all delicate people ſunk under it.

A courſe

A courſe of mercury, conducted in this manner, became therefore nearly as formidable as the diſeaſe for which it was preſcribed, and no other remedies being diſcovered the ſame practice was ſtill purſued, till a conſiderable time after the commencement of the preſent century. About this period ſome abatement of this rigorous courſe was introduced; but it was not till of late years that any material innovation took place in it.

This may be conſidered as one advantage among others that might be mentioned, which we have derived from rational theory. Some practitioners ſuſpecting that the ſalivary diſcharge produced by mercury could not probably be the means by which the cure of Lues Venerea was accompliſhed, and ſome trials which favoured this ſuppoſition being made, they ſoon came to think that all the ſymptoms of the diſeaſe might be removed with much leſs mercury than had commonly been employed. If the change of practice, which occurred as a conſe-

quence

quence of this opinion, had reſted here, much advantage would have been derived from it. But this was not the caſe. In every attempt to introduce an alteration, while we endeavour to avoid one extreme we are apt to fall into another. The inconveniences and diſtreſs induced by mercury in the way in which it had formerly been given being ſo great that every patient was much afraid of being put under it, any alteration that was propoſed for leſſening their ſufferings was moſt readily adopted, and practitioners perſuading themſelves that it might be done with ſafety, and wiſhing to adopt the treatment of the diſeaſe to the feelings of their patients, they unfortunately allowed this to carry them too great a length. So far as the eaſe and comfort of a patient is conſiſtent with his ſafety he is certainly entitled to it, but more than this he ſhould not be indulged in. There is much cauſe, however, to think that this has happened in the change of practice which has taken place in Lues Venerea. Inſtead of the full

full salivation that patients were formerly put under, and the strict confinement with which this was accompanied, a course, commonly termed alterative, was judged sufficient. In this, if the mercury is allowed merely to be felt in the breath, or by the slightest soreness of the gums, it is never permitted to go farther, and the patient, in a great proportion of cases, is allowed during the whole time that he is taking it to go abroad. That this will prove sufficient in many slight infections, and that it will even answer in many cases of a worse nature, if the course is carried to a proper length, I know from experience is true; but I also know that it ultimately fails in a great proportion of cases that are more inveterate and of long duration. Even in these it soon gives a check to all the symptoms, and will often make them disappear entirely; but where-ever the system is deeply injured, particularly if the disease has attacked the bones, although a cure may in some instances be completed by such a course,

and

and in all of them may be apparently obtained, yet in many the diſeaſe will afterwards break out again, and in all, even the firſt removal of the ſymptoms will be protracted to a much greater length than if more mercury had been given.

When I firſt engaged in practice the treatment of Lues Venerea upon this plan was by many adopted in its fulleſt extent, and I muſt own that few went more freely into it than I did. The opinion of ſalivation being unneceſſary, and that an alterative courſe was ſufficient, had not only been taught in the ſchools of medicine but the practice had been adopted by many of our beſt phyſicians and ſurgeons. Beginners therefore went readily into it; but if others from farther experience have been led to form the ſame opinion of it which I have done it will ſoon, except in the ſlighteſt caſes, be generally laid aſide. The reſult of all my experience is, that I am now fully ſatisfied that to render general practice in the venereal diſeaſe ſafe, that is to guard as

much as poſſible againſt a return of the diſeaſe, a middle courſe muſt be obſerved between the ſevere degrees of ſalivation which our forefathers judged neceſſary and the oppoſite extreme into which the moderns have fallen.

In caſes of a ſlight nature, that is in the incipient ſtate of mild chancres, what is commonly termed an alterative courſe will be found ſufficient. If the mouth be rendered gently ſore, and kept in this ſtate for eight or ten days after the chancres are cured, no more will be neceſſary. But even in the treatment of chancres only, if they have been of long duration, or not of the mildeſt kind, and in every other ſymptom of the diſeaſe, the mercury ſhould in a gradual manner be given ſo as either to induce a very conſiderable degree of ſoreneſs in the mouth, and which in moſt inſtances will be attended with an increaſed diſcharge from the ſalivary glands, or when from peculiarity of conſtitution this cannot be induced, we ſhould perſiſt in the uſe of mercury till the febrile ſymptoms which it uſually excites are brought

brought to as great a height as the patient can easily bear. It will generally indeed be perceived that those symptoms of the disease to which I allude cannot be cured but with such a quantity of mercury as perhaps in every instance excites heat, quickness of pulse, anxiety, and restlessness, and in proportion as the patient is able to bear these in a greater or lesser degree the sooner and more effectually will he get free of the disease.

I have already observed that I give a general preference to the method of cure by unction; but whatever preparation of mercury we make use of, it ought, in ordinary cases, to be pushed in a gradual manner to the extent I have mentioned; and when as much of it is employed as is sufficient for this effect, it ought to be continued so as to keep the system in an equal degree under its influence, not only till all the symptoms of the disease are removed but for some time thereafter. This will in different cases happen at different periods of a course, and with very different quantities of mercury. It is therefore

fore obvious that nothing decisive can be mentioned, either of the length of time to which a mercurial course should extend or of the quantity of the medicine that should be given. Our surest, and perhaps only guide that should be trusted, is the result of experience in similar cases; and as the certainty of guarding against a relapse is a point of the first importance nothing should ever be left in doubt that may be required for this purpose. In all primary affections, that is, in chancres and buboes only, and where no other symptom of the disease has appeared, I have found that a course of mercury conducted in the manner I have mentioned, and continued for a fortnight after the symptoms have disappeared, has at all times proved sufficient; but wherever the skin, throat, or bones have been affected, I now always advise the remedy to be persisted in for the space of a month after the cure is apparently completed. I cannot positively say that less than this would not do, but in a matter of such moment, where the health and happiness not only of

of the patient but of his progeny are at ſtake, it is better to exceed by giving occaſionally ſomewhat more than might be neceſſary than incur the ſmalleſt riſk of the poiſon being ever to appear at any future period.

I have ſaid that in ordinary practice the mercury ſhould be puſhed in a gradual manner to the extent to which we mean to carry it; that is, a ſmall quantity ſhould be employed at firſt, and gradually increaſed till the full effects expected from it are excited, by which we not only avoid the inconveniencies which always occur from a ſalivation being ſuddenly induced but are thereby enabled to throw in a much greater quantity, and to keep the ſyſtem more completely under its influence during the whole courſe than we ever can do when much mercury is given at once; and this, I may obſerve, is a point of the firſt importance in the treatment of ſyphilis, for whoever has paid attention to the ſubject muſt have perceived that our ſucceſs depends in a great meaſure upon the effects of the medicine being

fully and regularly kept up during the whole duration of the courſe, and which can ſeldom be done where it is not given in a gradual manner at firſt. When the fever, ſalivation, and other ſymptoms become ſevere, and which they are very apt to do when the mercury is given in large quantities at firſt, an interruption muſt neceſſarily take place, and it is the effect of every interruption to protract the continuance of the courſe and often to deceive both the practitioner and patient. My opinion, in ſhort, upon this point is, that our certainty of obtaining a ſpeedy and permanent cure of any ſymptom of Lues Venerea is not merely in proportion to the quantity of mercury we employ, but to the quantity which in an active ſtate can be thrown into the ſyſtem in a given ſpace of time.

But while with a view to this I have adviſed that in common practice mercury ſhould be given at firſt in a gradual or ſlow manner, it is proper to remark that caſes are ſometimes met with in

in which it is neceſſary to adopt a different practice. Wherever the ſymptoms of the diſeaſe are particularly urgent, from their being deeply ſeated in parts of much importance, and from the progreſs which they are making being rapid, we are juſtified in deviating from this general rule, and in applying the mercury in ſuch a manner as will moſt ſpeedily get it in a very ample quantity thrown into the ſyſtem. In this way a check will ſoon be given to the farther progreſs of the diſeaſe, when the medicine, during the reſt of the courſe, may be given in the gradual manner which I have juſt pointed out.

The time to be employed in a courſe of mercury, and the quantity to be given, are circumſtances, as I have already obſerved, that cannot with any exactneſs be aſcertained. They depend in a great meaſure, as we have had occaſion to remark, upon the effects with which they are attended, but I may obſerve in general, that few caſes are ſo bad as to require the medicine, when properly conducted, to be continued longer than nine or ten weeks.

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In recent cafes four or five weeks are for the moft part fufficient; while in fome obftinate old affections, where the bones have either been difeafed, or the ulcers very foul and extenfive, I have known it neceffary to go on to the twelfth or thirteenth week.

During thefe periods ointment of the ftrength I have mentioned may be rubbed in from the quantity of three ounces to eight or ten. When the blue mercurial pill is employed and properly prepared. the quantity may vary from four or five drachms to two ounces, or even to two and a half, or three ounces. Whenever thefe quantities are exceeded there is much caufe to fuppofe that a great proportion of the medicine has not entered the fyftem, either from the improper method of applying it or fome other caufe.

The opinion which I have thus ventured to fuggeft of the effects of mercury depending chiefly upon the quantity which in an active ftate can be thrown into the fyftem in a given fpace of time, will, at firft, be doubted by many. Being con-

contrary to the practice which now generally prevails, few may be inclined to follow it, but thoſe who do will have the ſatisfaction to find that by means of it they render their patients much more ſecure than can poſſibly be done in any other manner. By giving as large a quantity of mercury as the patient can with ſafety bear, they will find that the moſt inveterate ſymptoms of the diſeaſe may be cured in much leſs time, and with much more certainty than they uſually are by an alterative courſe, which, however well it may be adapted for the cure of the ſlighter ſymptoms of ſyphilis, is by no means ſufficient for the removal of the more advanced ſtages of the diſeaſe.

Many practitioners think that the ſame quantity of mercury muſt prove equally uſeful in whatever time it may be given, provided the mouth be kept moderately ſore during the whole period. This, however, is not the caſe. I have met with various inſtances of venereal ſores, as well as other ſymptoms, which had either obſtinately reſiſted a very long con-

continued courſe of this kind, or which had recurred from time to time after a cure had been ſuppoſed to be obtained, and which at laſt were entirely removed by a much leſs quantity of the medicine being given in a ſhorter period. What I wiſh to inculcate is, that the more inveterate ſymptoms of the diſeaſe will ſeldom yield to an alterative courſe of mercury, however long it may be protracted, while the ſame quantity of the medicine will ſeldom fail, when given ſo as to keep the ſyſtem for a ſhorter period more completely under its influence. I have now the hiſtory of more than fifty caſes in which this actually happened; where venereal ſores, from reſiſting mercury under an alterative courſe, were judged to be incurable, and where complete cures were afterwards obtained merely by carrying the uſe of mercury to a greater length than had previouſly been done.

VII. *Of*

VII. *Of the Regimen to be obſerved during a Courſe of Mercury.*

It was formerly the practice and ſtill is in ſome parts of Europe, to put every patient while taking mercury upon a low diet, and previous to the commencement of the courſe blood-letting and purgatives were preſcribed.

When it is neceſſary in a full habit of body to throw in any conſiderable quantity of mercury very quickly, and eſpecially when it is known that the patient has been liable to inflammatory complaints, ſome previous evacuation is proper, and the patient, during the firſt part of the courſe, ſhould be kept upon a low allowance. But in general there is no cauſe for this, and the cure proceeds with leaſt difficulty when the patient is kept upon his uſual diet. It is the effect indeed of mercury to produce weakneſs in ſuch a degree, that if not counteracted by nouriſhing diet, it is apt to injure the conſtitution

ſtitution materially. Of this I have met with ſo many inſtances, that unleſs where ſome ſtrong objection occurs to it, I always deſire patients under mercury to live as well as a perſon in health ought to do. A full allowance of animal food would, in moſt inſtances be improper, but I have never obſerved any harm occur from a plentiful uſe of any other article that did not diſagree with the ſtomach and bowels. When mercury is taken by the mouth, acid vegetables are apt to do harm; but there is no cauſe for avoiding them when the cure is conducted by unction.

Patients under mercury are commonly deſired to avoid wine and even malt liquor. A great quantity of either ought never to be given; but in moderate quantities they may be uſed with ſafety. Different opinions have alſo been entertained reſpecting the propriety of patients going abroad while under mercury. So far as my obſervation enables me to decide, I think there ſhould be but one opinion upon the ſubject. We are often obliged to allow venereal patients when uſing

mer-

mercury to go abroad, and to manage their ordinary bufinefs, but I have never done fo but with regret. Expofure to the irregularities of the external atmofphere always does harm in a courfe of mercury. It is apt to produce diftrefs at ftomach, pains in the bowels, and purging. This neceffarily impedes the operation of the medicine, by which the cure is not only protracted but rendered more uncertain. I am clearly of opinion therefore, that this kind of expofure fhould at all times be avoided. At the fame time I do not think it neceffary that patients under mercury fhould be kept in a great degree of heat. On the contrary, much advantage is derived from their living in a large well-aired apartment, and in a degree of heat that is moft agreeable to their own feelings. Nay, except in the cold weather of winter and fpring, there is no neceffity for confinement to one apartment; and any unufual quantity of cloathing, whether in bed or during the day, is altogether unneceffary. In fhort, much expofure appears obvioufly to prove hurtful, while

while no advantage is derived from the patient being kept in an unufual degree of heat.

I think it proper, however, to obferve with refpect to cloathing, that linen fhould never be worn next the fkin during the ufe of mercury; whether the patient fweats much or not it keeps the furface of his body colder than it ought to be; and if he is liable to plentiful perfpiration he is even apt to be hurt by it. Flannel fhould be wore during the cold of winter and fpring, and cotton when the weather is more temperate.

VIII. *Of Profufe Salivation and fome other Effects of Mercury.*

WE have already had occafion to fee that in the cure of Lues Venerea there is no advantage to be derived from any increafe that may be made to any of the fecretions. But we have alfo feen that the advanced ftages of the difeafe cannot be with certainty cured without fuch a quantity of mercury being thrown into the fyftem as very commonly excites an in- creafed

creafed difcharge of all the fecretions, and particularly of the faliva. When this continues moderate no harm enfues from it, but occafionally they come to fuch a height as to produce much inconveniency and diftrefs. Indeed the readinefs with which mercury in fome cafes runs to the mouth is fuch that it is with difficulty a fufficient quantity for curing the difeafe can be given; and it produces, I may obferve, one of the moft diftrefsful circumftances that we meet with in practice.

The moft certain method of preventing fevere falivation is the gradual exhibition of mercury in the manner we have already pointed out. Occafionally we fucceed in preventing it by guarding againft external cold, by confinement to the houfe and the ufe of warm cloathing of flannel or cotton. But while in this manner we fupport a gentle and equal flow of the matter of perfpiration, fevere fweating is to be avoided, which always proves hurtful, and even fometimes, as I have thought, more fo than profufe falivation.

But in ſome caſes, even with all the attention that can be given, the mouth becomes quickly ſore, and a gradual diſcharge of ſaliva takes place much ſooner than is expected.

Purgatives are the remedies moſt frequently employed for removing ſalivation: I have not found, however, that they prove uſeful, and when perſiſted in they never fail to do harm, for they weaken the patient, while they ſeldom have any effect in leſſening the ſalivary diſcharge.

Bliſters have alſo been adviſed. The ſenſe of ſuffocation, which the ſwelling of the ſalivary glands ſometimes gives, would appear to indicate the uſe of bliſters. We do not perceive, however, that they have much influence upon the diſcharge, while by the irritation which they excite they very commonly do harm.

As ſulphur when combined with mercury renders it ſo inert that it ſcarcely acts upon the human body, many have imagined that it ought to have ſome influence in leſſening or removing the ordinary

dinary effects of mercury upon the syſtem. We do not find in practice, however, that theſe views which theory ſuggeſted are in any degree realiſed. It has often been employed for leſſening the violence of ſalivation, but few inſtances have occurred of any advantage being derived from it.

To me it appears that this effect of mercury is entirely local, and to be cured therefore with moſt certainty by local remedies. It is obviouſly the conſequence of irritation produced by mercury upon the ſalivary glands: The dread, therefore, which ſome have entertained of applying local remedies ſeems to have no good foundation; and accordingly I have found that they may be employed with freedom. As a waſh for this purpoſe lime-water proves uſeful, but it requires to be diluted. A ſtrong infuſion of red-roſe leaves, of galls, oak-bark, and other aſtringents, prove alſo ſerviceable; but the moſt effectual application I have ever employed is a ſtrong ſolution of bo-

rax *. A little of it being kept in the mouth from time to time proves exceedingly pleasant and soothing, and at last has often an obvious effect upon the quantity of the discharge. It may prove in some degree useful as an astringent, but it seems to act chiefly as a sedative by lessening the irritable state of the salivary glands.

It is evidently in this manner that opium proves useful in removing salivation; for although some advantage is derived from applying it directly to the parts affected in the form of a gargle it proves always much more useful when given internally. A dose of laudanum, sufficient to allay the irritation and pain which always accompany a profuse salivation, and to procure sleep during the night, not only gives temporary relief but is the most powerful remedy we can employ for removing the discharge.

* Vide Appendix, No. 20.

When

When the uneafinefs is fevere the opiate fhould alfo be repeated in the morning.

Where falivation comes fuddenly to a greater height than the quantity of mercury we have employed fhould give us caufe to expect we are apt to be at a lofs, and afraid of giving more left diftrefsful confequences enfue from it. In fuch circumftances, however, I have often found that although the ufual quantity of mercury was continued daily the falivation was not increafed, and that in this manner it might be perfifted in till the cure was completed. This will not indeed be always the cafe; but it fucceeds fo frequently, that in every inftance a trial fhould be made of it, for a cure may thus be effected in a few weeks which otherwife might be protracted for feveral months.

It has alfo been remarked, if falivation excited in this manner be allowed to fubfide entirely, that the fame, or even a greater quantity of mercury, may afterwards be exhibited without any rifk of

the diſcharge coming again to a ſimilar height. Of this I have met with ſeveral inſtances, ſo that the practice may always be adopted when it is found that a proper quantity of the medicine cannot be continued with ſafety from the firſt.

One of the moſt diſtreſsful occurrences which we meet with in this diſeaſe proceeds from a peculiarity inherent in ſome conſtitutions, by which even the ſmalleſt quantity of mercury that we employ is apt to ruſh with violence to the mouth. This is particularly apt to happen where the patient at the ſame time labours under the ſea ſcurvy. In this caſe our only remedy is the removal of the ſcorbutic diatheſis by a plentiful uſe of acid vegetables and other antiſcorbutics, but where it does not proceed from this cauſe all that we can do is to give thoſe preparations of mercury that are leaſt apt to affect the mouth, and to preſcribe them in the ſmalleſt doſes. In this view corroſive ſublimate in ſmall quantities is particu-

larly

larly indicated; and in ſuch conſtitutions I have ſometimes found that Plummer's pill, a combination of calomel and ſulphur, and which in common practiſe no great dependence can be placed upon, has proved completely ſuccefsful *.

It luckily happens, however, where ſalivation is thus eaſily excited that the ſymptoms of ſyphilis in general yield to a ſmall quantity of mercury. Some of the worſt ſymptoms of the diſeaſe will give way to a ſalivation induced by a very few grains of mercury. Even the uneaſineſs produced by nodes ſubſides at once on the ſalivation being fully excited. But it is proper to remark that this firſt effect of the mercury will not prove permanent if it be not followed out with farther quantities, given at ſuch intervals as the ſtate of the ſalivation will admit. I have repeatedly found, however, that this may be done with ſafety, even where a ſevere degree of ſali-

* Vide Appendix, No. 21.

vation has previouſly taken place. In one caſe of this kind, where there were deep venereal ulcers on the ſhoulder and on the head, as well as a node upon one of the bones of the fore arm, a violent ſalivation was excited by the exhibition of five mercurial pills, each of which contained only one grain of mercury. This gave an entire check to the pain which accompanied the node, and to the progreſs of the ulcers, and although other five pills only were given the ſalivation was kept up for eight weeks, when the ſores healed and the cure was complete, no venereal ſymptoms having yet appeared, although ſeveral years have elapſed.

In the progreſs of a long continued ſalivation tooth-ach and pains in the jaws and gums are apt to occur, and they add much to the diſtreſs of the patient. There is one advantage that we derive from giving mercury in a gradual manner; by beginning with ſmall quantities and increaſing them ſlowly the glands of theſe parts do not ſwell ſo ſuddenly, nor is the pain

pain which enſues ſo ſevere as when too large doſes are made uſe of at once. We alſo derive ſome advantage from keeping the parts moderately covered with thin flannel. There is no neceſſity for the head being ſo warmly covered as is commonly done, nor is it at all neceſſary where theſe pains do not take place; but when once they have occurred nothing proves more uſeful than moderate warmth. Indeed flannel ſeems here to be equally uſeful as it is in the ordinary form of rheumatiſm; from which, and from the reſemblance which theſe pains to which patients taking mercury are liable in their jaws and head bear to rheumatic affections, I conclude that they are of the ſame nature.

Before a patient enters upon a courſe of mercury, if there is cauſe to imagine that he will be long kept under it, and that a large quantity of the medicine will be neceſſary, we may ſave him a good deal of diſtreſs by inſpecting his mouth and removing any teeth that are either very

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looſe or much ſpoiled; for teeth in this ſtate never fail to give much pain when the full effect of the mercury upon the mouth has taken place. The points of teeth that are ragged ought alſo to be removed, as they are apt to produce painful and troubleſome ulcers on the contiguous parts as ſoon as they become much ſwelled.

Ulceration of the inſide of the cheeks and other parts of the mouth occurs alſo, and often in a very diſtreſsful manner from the mercury alone, where no teeth in this ſtate can be diſcovered. The moſt effectual method of preventing this is, to cauſe the patient, from the very firſt effect of mercury upon theſe parts, or even before this takes place, waſh his mouth ſeveral times a-day, perhaps every two hours, with port wine and water, an infuſion of red roſe leaves, or any other aſtringent. In this manner we ſtrengthen the parts againſt the uſual action of the medicine, and it alſo proves uſeful by preventing that foulneſs of the mouth which in every courſe of mercury is apt to take place.

Fig

Fig tea and other emollients are commonly employed for this purpofe, but I have not found that they anfwer fo well as aftringents.

In fpeaking of the different preparations of mercury we had occafion to remark that almoft all of them, when given internally, are apt to injure the ftomach and bowels. It is chiefly the bowels, however, which fuffer from mercury, and they do fo in fome inftances in a very alarming degree. The purging which takes place proves not only painful and debilitating, but often exceedingly obftinate. At firft the difcharge confifts chiefly of fœces, but afterwards thefe are mixed with flime, and often with confiderable quantities of blood. The patient is alfo apt to fuffer from a very frequent tenefmus.

From the fimilarity of fymptoms we fhould be apt to imagine that purgatives might be equally ferviceable here as in common cafes of dyfentery and diarrhœa; but we do not find this to be the cafe. We derive fome advantage, however, from fheath-

ſheathing the inteſtines with a plentiful uſe of the farinaceous vegetables, and animal jellies prepared with calves feet, and ſhavings of hartſhorn. Milk boiled to the conſiſtence of a jelly with wheaten flower, or flower of rice, proves likewiſe an uſeful remedy.

In preventing this effect of mercury upon the inteſtines we derive moſt advantage from the patient being kept in a moderate and equable heat, and from his ſkin being preſerved in a perſpirable ſtate; and ſo remarkable is the influence of this, that the ſlighteſt check to the diſcharge by the ſkin ſeldom fails of inducing purging. The fact indeed is ſo generally admitted that I would not have taken this particular notice of it, if a contrary opinion had not lately been advanced, and from which much miſchief might enſue, were the practice to be adopted which it tends to inculcate *.

Cam-

* Mr. John Hunter, whoſe ingenuity and abilities are only to be equalled by his ſingular opinions, does not

Camphor proves ſometimes uſeful in correcting this ſymptom. It may be given for this purpoſe to the extent of eight or ten grains, three times a-day. Some of the abſorbent earths, and kino, are ocſionally uſed with advantage; but opiates, particularly when thrown up by the rectum, are the remedies upon which we chiefly depend for removing the pain, and this is very commonly attended with a diminution of the diſcharge. When a glyſter of thin ſtarch and fifty or ſixty drops of laudanum can be retained it ſeldom fails to give immediate relief, but where the teneſmus is ſevere whatever is injected by the anus is very apt to be inſtantly returned. In this caſe opium con-

not imagine that the operation of mercury can be affected by cold, not even by the patient being allowed to walk "in froſt and ſnow." Mr. Hunter does not ſay that he has practiſed this method, and I cannot avoid obſerving that nothing ſhould have warranted the publication of ſuch an opinion but very ample experience of its being well founded. Vide Mr. Hunter's Treatiſe on the Venereal Diſeaſe, p. 349.

joined

joined with kino, in the form of pills, ſeems to be the beſt form of the remedy.

It is here proper to remark, that although purging and gripes are frequent conſequences of the internal uſe of mercury they are ſeldom obſerved during the longeſt mercurial courſe where unction only is employed. When the courſe is conducted in this manner looſe ſtools may occaſionally occur, but they may generally be traced to the effects of cold and dampneſs. I have ſeldom obſerved an inſtance of ſevere or obſtinate diarrhœa from the external application of mercury.

When none of the means employed for removing purging induced by this cauſe prove effectual, we are under the neceſſity of adviſing a temporary ſuſpenſion of the mercury, without which, indeed, all our remedies will frequently fail.

Profuſe ſweating, I have already noticed as an effect that ſometimes enſues from mercury, and it ought to be guarded againſt with much attention. Nothing tends

tends more to induce debility and injure the conſtitution than a long continuance of this ſymptom.

The moſt effectual method of preventing ſweating is to avoid much warmth, ſo that patients are ſeldom hurt with it who pay due attention to the heat of their apartments. It was formerly the practice to confine patients under mercury to ſmall apartments; to prevent as much as poſſible all kind of acceſs to the external air; and to have the bed placed by the ſide of a large fire. Theſe meaſures prove detrimental in different ways, and they ſeldom fail to excite a conſtant and profuſe perſpiration. The moſt effectual method of preventing this is, to keep the patient in an equal moderate temperature, in a large apartment, and even to admit of his going from one apartment to another, which, in moſt inſtances, may be done with ſafety. A nouriſhing diet, a moderate allowance of wine, the free uſe of Peruvian bark, and of the vitriolic acid, are the moſt effectual remedies againſt this effect of mercury.

But

But nothing proves ſucceſsful where the apartment is kept too much heated.

In ſome caſes the kidneys are particularly acted upon by mercury; but the diſcharge of urine which it excites is ſeldom ſo great as to injure the patient. Were it ever to do ſo, the remedies commonly employed in diabetes would be adviſed, and of theſe the moſt effectual perhaps that we could give, would be ſuch as operate by promoting a diaphoreſis.

It is not an uncommon effect of mercury to excite an eruption upon the ſurface of the body. In ſome this appears as a miliary raſh, ſomewhat reſembling meaſles; while in others it is conſiderably elevated, and ſeems to be produced by a ſerous effuſion between the cutis and ſcarf ſkin. In ſome the eruption is partial, being confined to particular ſpots, while in others it prevails generally over the whole body.

This eruption or efflореſcence is not attended with pain, but the heat and itchyneſs which accompany it are in ſome inſtances.

ſtances ſo diſtreſsful that it keeps the patient at all times very uneaſy, and deprives him entirely of reſt.

The remedies which I have found to anſwer beſt are the internal uſe of opiates, conjoined with the application of flower, or ſtarch-powder to the parts affected. The ſkin is kept ſufficiently cool and eaſy by one or other of theſe powders being from time to time freely applied to the eruption; and by a proper exhibition of opiates we ſecure reſt during the night. In ſome inſtances, however, we are obliged to avoid the uſe of opiates; for although they may anſwer the purpoſe of procuring ſleep they tend evidently to increaſe the heat and itchyneſs of the eruption. We find, indeed, that in ſome conſtitutions opium excites an uneaſy itchy ſenſation over the whole body, even where no eruption has previouſly taken place; and it is perhaps with ſuch patients only that it cannot be employed in the treatment of this eruption.

The eruption to which I allude appears to ariſe entirely from the effect of the mercury upon the ſyſtem; but it does not ſeem to depend upon any particular preparation of the remedy. It takes place indiſcriminately from all of them, and not more readily from unction than from theſe preparations that are uſed internally. But there is a kind of eruption of a local nature, produced entirely by the friction employed in the application of unction. This appears in the form of diſtinct puſtules, which in ſome are accompanied with a good deal of uneaſineſs, while in others they produce no kind of diſtreſs. No remedy proves of any avail while the application of the ointment is continued, but the eruption may always be prevented by the precaution we have formerly given, of not applying the friction in daily ſucceſſion to the ſame part.

IX. *Does*

IX. *Does Mercury ever fail in the Cure of Lues Venerea?*

THIS is a queftion of the higheft importance, and therefore merits our attention. I am difpofed from the refult of my own experience to fay, that mercury under proper management may be confidered as a certain remedy for fyphilis when not combined with other difeafes, or where it does not affect patients whofe conftitutions are fo reduced and debilitated as to prevent the quantity of the medicine that is neceffary to deftroy the virus from being employed. I know that fome are of a different opinion; but I conclude that they are wrong, from my never having met with an inftance of mercury having failed when it was properly given, but where fome obvious reafon, fuch as I have mentioned, could be affigned for it.

Lues Venerea, as we have already had occaſion to ſee, is often combined with diſeaſes in which mercury commonly does harm. This is particularly the caſe in ſcurvy, and in ſome degree with ſcrophula. In the higher degrees of ſcurvy mercury cannot be given but with great danger; and even where it prevails in a ſlight manner only, mercury cannot be employed in ſuch quantities as are ſufficient for eradicating any of the more formidable ſymptoms of Lues Venereå. When the two diſeaſes therefore are conjoined we cannot expect that mercury will have much influence in the cure of any venereal ſymptoms that may take place; and I believe that we are often diſappointed in the treatment of this diſeaſe by the patient at the ſame time labouring under a certain degree of ſcurvy, which although not ſo obviouſly marked as to indicate the propriety of adviſing an antiſcorbutic regimen, may yet be ſufficient to prevent him from receiving the full advantage of a courſe of mercury.

I con-

I conclude this to be the caſe from the frequent inſtances of the failure of mercury in the cure of many of the ſymptoms of ſyphilis, in which it afterwards proves ſucceſsful when the conſtitution of the patient has been reſtored from a weak debilitated ſtate to ſtrength and firmneſs, and which we uſually accompliſh by a milk and vegetable diet, country air, and ſuch other articles of regimen as generally contribute to remove even the high degrees of ſcurvy.

Nay, I believe that a mercurial courſe, when long protracted, is apt to induce a certain degree of that very ſtate of the ſyſtem which I now allude to, and which I conceive to be the cauſe of the remedy being often found to fail where in this manner it has been long continued. Every practitioner is acquainted with this circumſtance, that a variety of venereal ſymptoms, and more eſpecially extenſive ulcers, will to a certain length do well under mercury, when after a great deal of the medicine has been exhibited they will begin to remain ſtationary, and make

no progreſs whatever, although the mercury ſhould be given even in larger quantities than at firſt. Nay, in ſome inſtances they become worſe. The diſcharge from the ulcers, inſtead of being mild and purulent, as for ſome time it may have been, will become thin, ſharp, and corroſive, and the ſores themſelves more extenſive. In this ſituation a farther continuance of mercury very commonly does harm, while the moſt obvious advantages are derived from it after the conſtitution of the patient has been reſtored by the influence of a proper regimen. We even ſometimes find that a cure is accompliſhed by regimen alone, and that no more mercury is required, but this can only happen where a ſufficient quantity of the medicine has been previouſly given for deſtroying the virus of the diſeaſe, and where the ulcers which remained were kept up by a ſtate of the ſyſtem, which mercury, inſtead of removing, ſeems evidently to promote.

In the commencement of a mercurial courſe, and for ſome time thereafter, it is a certain effect of mercury to excite inflammation, and to produce that ſtate of the ſyſtem which we conceive to be the very reverſe of what takes place in ſcurvy. The pulſe becomes full and frequent, and the blood is firm and ſizy; but all who have paid attention to the ſubject will have perceived that the contrary happens where mercury has been long continued. The patient, however full he may have been, is for the moſt part much emaciated: his pulſe is feeble, and any febrile ſymptoms to which he may be liable are of the low or putrid kind. The particular ſtate of the blood in this ſituation we have few opportunities of obſerving, as for the moſt part the diſcharge even of a ſmall quantity would in ſuch circumſtances prove hurtful, and therefore is not adviſed. We have reaſon, however, to conclude, that it is the reverſe of what takes place from inflammation, as the

moſt effectual remedies we employ here, are a generous diet, wine, and bark.

This opinion of the effects of mercury upon the ſyſtem receives ſome confirmation, I may remark, from the putreſcency which it evidently excites in the mouth; and from the peculiar tendency both of mercury and ſcurvy to excite a tender ſtate of the gums, and a very fœtid ſtate of the breath, we have reaſon to ſuppoſe that the effects of both are in ſome degree the ſame.

This might be farther elucidated by various arguments which the extent of this publication will not admit. Enough, however, has been ſaid for the purpoſe of explaining the chief part of the treatment I have ventured to propoſe; particularly that which relates to diet and other articles of regimen during a courſe of mercury.

In ſpeaking of ſcrophula as an impediment to the action of mercury in the cure of Lues Venerea I do not mean to ſay that the diſeaſe cannot be cured in ſcro-

phulous

phulous constitutions. We daily meet with the contrary of this: But we also find, when the same sore partakes both of scrophula and Lues Venerea, that we do not derive the same advantages from mercury as in sores purely venereal. In such circumstances, after as much mercury has been given as is productive of any beneficial effect, and of which we judge by the sores or other symptoms making no progress towards farther amendment, our best chance of effecting a cure is to omit the mercury, and not have recourse to it again till by the use of bark, cold bathing, cicuta, and other remedies employed for scrophula, the disposition is corrected or removed by which the operation of the mercury upon the syphilitic symptoms was rendered ineffectual.

But the most frequent cause of our failure with mercury in the cure of this disease is that which I have already had occasion to insist upon, our giving it in such small quantities as are not sufficient in the more ad-

advanced ſtages of the diſeaſe for eradicating the virus; by which, although the ſymptoms may all be rendered much milder, or even apparently removed, they either do not entirely diſappear, or if they do, are afterwards very apt to recur. This, however, is not the fault of the remedy, but of the method of giving it, and of which all who adopt the practice of giving it in ſufficient quantities will be convinced. Since I went into this practice, beſide having had many inſtances of the medicine proving effectual when exhibited in theſe quantities, where it had previouſly failed, I have not as yet, and ſeveral years have elapſed, had a ſingle inſtance of its failure, except in ſuch combinations as I have mentioned, or where the conſtitution was in ſuch a ſtate of debility that a ſufficient quantity of mercury could not be employed. But even of theſe very few caſes have occurred. I have no heſitation, therefore, in ſaying that mercury under proper management may, with very few

limi-

limitations, be considered as a certain remedy for syphilis.

§ 3. *Of Guaicum.*

GUAICUM has long been employed as a remedy in Lues Venerea. It was used indeed very generally over Europe soon after this disease came to attract the attention of practitioners. Being for some time the only remedy upon which any dependence could be placed, it was at first greatly extolled by all who wrote upon it; and from the testimony given of it by authors of the first reputation not only of these times, but of later periods, there was no reason to doubt of its being possessed of the power of mitigating, and perhaps of curing some of the symptoms of syphilis. The powers of mercury, however, were found to be so pre-eminent that guaicum came at last to be seldom used by it-

itſelf, but by many it was, and ſtill is continued as an aſſiſtant to mercury.

Being ſeldom given by itſelf many came at laſt to doubt whether any advantage was obtained from it or not; and ſome went ſo far as to ſay that it poſſeſſed no power whatever over any ſymptom of this diſeaſe. This is one, which among other effects, might be mentioned that reſult from habit and prejudice. I own too, that from the ſame cauſe I was at one period of this opinion, till I found by experiment that guaicum in different forms could even by itſelf remove many of the ſymptoms of ſyphilis. Venereal ulcers and blotches upon the ſkin are the ſymptoms in the removal of which its effects are moſt conſpicuous. In three caſes of ulcers, and one of blotches upon the breaſt and arms, all clearly marked, and in which mercury had never been employed, the ſymptoms were completely removed by the internal uſe of guaicum alone. In the patient with blotches, however, the diſeaſe returned in the ſpace of a month, but

but not in the ſame form. In one of the others the ulcers appeared again at the end of ſix weeks. In a third they continued well after three months had elapſed, but what became of this patient afterwards, and of the fourth, I do not know. The two firſt were afterwards cured with mercury.

Although the reſult of theſe trials did not induce me ever to truſt to guaicum alone, they gave ſufficient ground to conſider it as a remedy from which ſome advantage may be occaſionally derived when conjoined with mercury; and accordingly I have been led to continue, or rather to re-commence the uſe of this remedy in many caſes of ſyphilis, for at one period, from the cauſe I have mentioned, I had laid it entirely aſide.

I believe, indeed, that I would have been induced to place more dependence upon it, or at leaſt to have proſecuted my experiments with regard to it farther than what I had done, if I had not been prevented by the reſult of ſome trials which Mr.

Mr. Hunter alſo had made with it, and which he publiſhed about the ſame period. By theſe it evidently appeared that guiacum has a conſiderable influence upon the venereal virus. I never made trial of it as a local application; but Mr. Hunter found that in this manner it cured venereal ulcers, firſt in one part of the body, and afterwards in others, where ſarſaparilla employed in a ſimilar manner had failed. He found too that very numerous venereal ulcers were removed by the internal uſe of it, but after both trials the diſeaſe ſoon returned. Mr. Hunter's experiments were made with the gum, mine with an extract and ſtrong decoction of the wood. The extract ſeemed to be equally effectual with the decoction, but as it has a ſtrong tendency to affect the bowels I ſoon left it off, and employed the latter only. In theſe caſes to which I allude, as well as in ſome others, a very ſtrong decoction was employed, three ounces of the wood to an Engliſh quart of water, that is, this quantity was boiled in

in two quarts of water into one, and this was taken in the courſe of a day, either by itſelf or mixed with milk; but as it is apt to purge when of this ſtrength, and is likewiſe diſagreeably acrid, and as I never now depend upon it alone for the cure, I ſeldom put more than an ounce to this quantity of decoction *.

That mercury might not cure every ſymptom of ſyphilis equally well whether guiacum was employed along with it or not I will not poſitively ſay; but I am diſpoſed to think, and not without much attention to the ſubject, that the cure commonly goes on more eaſily when the two are conjoined than when mercury is given to any great extent by itſelf. I am therefore in the frequent habit of uſing guiacum, particularly where the diſeaſe is of long duration and has appeared upon the ſurface, either in the form of ulcers or eruption. It has alſo been much recommended for its efficacy in nodes, and

* Vide Appendix, No. 22.

for

for the removal of thoſe pains reſembling rheumatiſm, which frequently proceed from ſyphilis. I have not found, however, that it proves ſo uſeful in nodes as in other ſymptoms of the diſeaſe; and where pains only take place we can never with ſuch certainty determine from what cauſe they proceed, as they are undoubtedly one of the moſt equivocal ſymptoms of ſyphilis, and there is no cauſe to doubt of guaicum being a very uſeful remedy in caſes merely rheumatic.

I have in different inſtances found a ſtrong decoction of guiacum prove particularly uſeful in the cure of thoſe extenſive ulcers which ſometimes ſucceed to buboes. In ſome the guaicum anſwers by itſelf, but it proves more frequently ſucceſsful, as we ſhall hereafter have occaſion to mention, when conjoined with mezereon and ſarſaparilla.

§ 4. *Of*

§ 4. *Of Sarſaparilla.*

SARSAPARILLA has been long employed in the cure of Lues Venerea, and from the reſult of ſome trials which I made with it I am diſpoſed to think that ſome advantage may be derived from it. The trials which I have made with it along with mercury have been numerous, but it is not upon theſe that any judgment can be formed of its real efficacy. Neither have I given it often where mercury had not been previouſly uſed; but I have had many opportunities of uſing it in caſes where mercury had not proved altogether ſucceſsful, whether from being given in too ſmall quantities, or from being exhibited without that attention to regimen which it requires, and in a great proportion of theſe it has been productive of evident good effects. I have found it particularly uſeful in thoſe ſymptoms which chiefly affect the ſkin, ſuch as blotches and the remains of old venereal ulcers.

When mercury from either of the causes which I have mentioned has failed of compleating the cure I have in various instances known it accomplished by sarsaparilla, where otherwise there was much reason to think that mercury in a larger quantity, or given in a different manner, would have been necessary.

I have given sarsaparilla in powder, in extract, and in decoction, but the latter has always appeared to answer best. Not unfrequently I conjoin it with guiacum, and it answers the purpose of blunting the acrimony of the latter *.

Sarsaparilla and guiacum have both a tendency to promote perspiration. Besides any power which they may possess of acting directly upon the venereal virus, they seem also to prove serviceable where mercury goes too readily to the mouth, in diverting it from that outlet *.

* Vide Appendix, No. 23.

§ 5. Of

§ 5. *Of Mezereon.*

The root of this plant has long been employed for the removal of ſchirrous tumours by whatever cauſe they may be produced, and many have thought that it has proved particularly uſeful in venereal nodes, as well as in ſome other ſymptoms of this diſeaſe. As I have not made much uſe of it where mercury was not either employed along with it or before it was given, I cannot from my own obſervation determine whether it is poſſeſſed of the power of curing ſyphilis by itſelf or not; but from much experience of the effects of it when conjoined with mercury, I can ſay deciſively that in this manner it often proves uſeful. I have never known any advantage that was ſufficiently clear and obvious derived from it in nodes, but it certainly tends to heal thoſe ulcers which ſometimes remain obſtinate after the quan-

tity of mercury is given that we judge to be neceſſary.

I have already had occaſion to mention that ſpreading ulcers of this kind are particularly apt to ſucceed to buboes, and that they often reſiſt all the remedies that we employ for them. As this ſometimes happens after a very full quantity of mercury has been given, and as the ſores often heal at laſt from the effects of a change of regimen alone, I conclude that they are not kept up by any remains of Lues Venerea; and as it is in this ſtate of the diſeaſe that I have chiefly obſerved any advantage to accrue from mezereon, I conclude that it acts particularly by correcting that ſtate of the ſyſtem which a long continued uſe of mercury is apt to induce, and which by experience we find to be very inimical to the cure of all ſuch ſores as the patient at the time may labour under.

It ſeems to be in this manner that Kennedy's decoction, and of which mezereon

reon appears to form a considerable part, proves particularly useful. There is no reason to suppose that any quantity of mercury is contained in that decoction, and yet there is no cause to doubt of sores of this description having been often soon healed by it, which had previously resisted every attempt that was made to cure them. Of this I could mention several histories which have fallen within my own knowledge, but they are too long to admit of insertion in this place. This decoction, I may remark, appears to be nearly, or perhaps entirely the same with the Lisbon decoction, for which a form is given in the Appendix *.

In using this root it is proper to observe, that the ligneous parts of it are altogether inert. The bark of the root appears to be the only active part of it. An English quart, containing a drachm and half of the bark, is a sufficient quantity to be taken in the course of a day, and even this,

* Vide Vol. I. Nos. 46 and 47.

when the root is in perfection, renders the decoction so acrid that it is apt to affect the throat. With a view to lessen this acrimony we conjoin it with gum arabic, liquorice, althea, and often with sarsaparilla *.

§ 6. *Of Opium.*

Opium had long been employed for the relief of that kind of irritation which some of the symptoms of Lues Venerea are apt to excite, but it was not till within these fourteen years that it was supposed to possess any power of destroying the venereal virus, or of curing this disease. It was first employed with this view in the British hospitals in America; and Doctor Michaelis, physician to the Hessian troops was, I believe, the first who put it to the test of experiment,

* Vide Vol. II. No. 24.

Since

Since that period it has been ufed as an antifyphilitic medicine by various practitioners in almoft every part of Europe; and it has had the fate of almoft every new remedy, or of every remedy employed with new motives. Some have fpoken of it in the higheft terms of panegyric, while others do not admit that it is capable of removing even the mildeft fymptom of the difeafe. In matters of doubt all that authors ought to attempt is to ftate clearly what they know to be matter of fact, as it is from the refult of repeated trials properly authenticated that an adequate judgment on all fuch points is alone to be formed. As it appeared to be a matter of the firft importance to have a new remedy for the cure of Lues Venerea, and which was reported to act with much more eafe and certainty than mercury, I was one among many who gave it a very full trial. It was ufed in a variety of cafes and in different ftages of the difeafe; but in no inftance did it accomplifh a cure where there was caufe to fup-

poſe that the virus was not previouſly deſtroyed by mercury. Sores originally produced by this virus, and kept up, as is ſometimes the caſe, by irritation alone, and long after the venereal taint is deſtroyed, are more effectually cured by opium than any other remedy. Sores which from this cauſe have remained obſtinate for a great length of time, are, by the uſe of opium, often brought to a healing ſtate; and when the conſtitution is not otherwiſe diſeaſed, they are, for the moſt part, ſoon cicatriſed. It is proper, however, to diſtinguiſh between theſe ſores and ſuch as are venereal. Sores in this ſtate are not to be conſidered as venereal. The venereal virus, it is true, has acted as the exciting cauſe, but this being deſtroyed by mercury, they no longer depend upon this, and in ſuch circumſtances are to be treated in the ſame manner with ſores of a ſimilar nature proceeding from any other cauſe. In whatever way ſores may have taken place, if much irritation prevails, opium is perhaps the beſt remedy

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we can employ, but I have not found that it proves more effectual in sores that are the consequences of Lues Venerea than in such as are produced by any other cause, provided the degree of pain and irritation with which they are accompanied be the same.

I suspect much, therefore, that this distinction has not met with sufficient attention by many who consider opium as a remedy in the cure of syphilis. By acting as a very effectual remedy in the cure of many sores in which mercury had failed, they have been induced to attribute powers to opium which I have much reason to think it does not possess, for I have never known it prove effectual where mercury had not previously been given.

Antisyphilitic powers being once attributed to opium it was readily imagined that in proportion to the quantity exhibited it would prove more or less effectual. It was accordingly given in large doses, and these were more frequently repeated than had been usual in former practice. Few, I be-

believe, made more complete trials of it, or have puſhed it farther than I have in various inſtances done: Beginning with two grains at bed-time, one in the morning, and another at mid-day, and adding a grain to each doſe every third or fourth day, patients in this manner I have found could bear very conſiderable quantities in the courſe of a ſhort time. One of my patients who could not at firſt bear more than a grain at once, in the courſe of five weeks took three doſes of fifteen grains each, daily. I did not find, however, that any advantage was derived from giving it ſo largely, while it frequently did much harm. It was apt to excite ſickneſs, head-ach, and giddineſs, a total loſs of appetite, in ſome an obſtinate coſtiveneſs, and what was more ſurpriſing, it acted with many as a ſmart purgative. I never obſerved this effect, however, till the doſe came to the extent of ten or twelve grains; but when this ſymptom did take place from it, no aſtringent medicine ſeemed to have any effect in removing it, and it

was

was only relieved by emetics and purgatives.

I muſt indeed admit that opium was taken by many, even in large doſes, without any inconvenience or diſtreſs; but being ſoon ſenſible that it had no effect in deſtroying the venereal virus; that it proved in no other way uſeful than by leſſening or removing irritation; and that this reſulted with equal certainty from moderate doſes, I have of late deſiſted from giving it in larger quantities than two or three grains in the courſe of a day.

Opium conjoined with an emetic has long been known as a very uſeful remedy in rheumatiſm; and I have found it prove particularly uſeful in thoſe pains reſembling rheumatiſm which occur in the venereal diſeaſe. But the relief which it procures is only temporary if mercury be not employed along with it. For this purpoſe laudanum may be given along with tincture of antimony, or opium may

may be given with ipecacuan, in the form of Dover's powder †.

In ſome caſes opium proves uſeful as an external application, whether employed as a waſh for painful phagadenic ulcers, or in a ſolid form as an ointment; but it does not appear, even in this manner, to act in any other way than as an anodyne.

SECTION V.

Of the Cure of Lues Venerea.

§ 1. *Of the Cure of Chancres.*

A DESCRIPTION of chancre is given in Section II. of this Chapter, page 13. The firſt queſtion to be determined in the treatment of chancre is, whether the cure

† Vide Appendix, No. 25.

ſhould

ſhould be truſted entirely to the internal exhibition of mercury; to the uſe of local applications; or to both of theſe combined.

A conſiderable time ago I had occaſion to mention my opinion on this ſubject, and hitherto I have ſeen no good cauſe for deſerting it *. My opinion at that time was, as it ſtill is, that chancres ſhould be healed as ſpeedily as poſſible, and that this may be done with ſafety by combining the advantages of local remedies with the internal uſe of mercury.

Many practitioners think that chancres ought not to be healed but by the internal uſe of mercury alone, and they give as reaſons for this, that when external applications are employed we can never be certain whether the conſtitution is rendered ſafe or not, while we can ſcarcely be deceived, they imagine, when chancres heal

* Vide Treatiſe on the Theory and Management of Ulcers.

ſolely

ſolely from the uſe of mercury. To this practice, however, there are different objections. The internal exhibition of mercury alone will not always cure chancres. I have known a perſon kept under the complete effect of mercury for many weeks, and the chancres for which it was preſcribed remain nearly in the ſame ſtate as at firſt. Nay, in different inſtances, where this practice was purſued, and in which the cure was truſted to mercury alone, although the remedy was continued in all of them for ſix or ſeven weeks, and under the beſt management, as the chancres did not heal the mercury was laid aſide on the ſuppoſition of the conſtitution being rendered ſafe; but although in all of them the ſores were ſoon cured by the application of cauſtic, red precipitate, or ſome other eſcharrotic, in ſeverals ſymptoms of pox appeared in the courſe of a few weeks; in ſome with ulcers in the throat, and in others with blotches upon the ſkin. From which I conclude that we cannot depend upon the

the internal uſe of mercury alone for the cure of chancres; nor have I obſerved that it acts with certainty, unleſs the ſores are kept up by the virus having entered the conſtitution.

But the moſt important objection to the practice is, that being much more tedious in accompliſhing a cure, it creates a greater riſk of the virus entering the ſyſtem than when the ſores are more ſpeedily healed by the uſe of external applications. The practice of healing chancres by the internal uſe of mercury only, originated from an opinion that venereal ſores of every deſcription proceeded from the conſtitution being infected, and were this the caſe, there might be cauſe to conſider it as well founded; but now that we know that chancres at firſt are always local, and that they are the ſource of whatever matter enters the ſyſtem, it is obvious that the more ſpeedily they can with propriety be healed the leſs will be the riſk of the conſtitution being injured.

Chancres

Chancres might frequently be cured by the ufe of external applications alone, and as we know from experience that the matter is not always abforbed the cure would in a few inftances prove permanent; but as we have no means of diftinguifhing when this is the cafe, while there is reafon to think that in moft inftances abforption takes place, we ought in no cafe to truft to it. In order to avoid the inconveniencies of a courfe of mercury it has been fafhionable of late to truft the cure of recent chancres to local remedies, but I know from various inftances in which I have been confulted, that the practice is exceedingly dangerous. The chancres may be eafily healed; but where mercury is not employed the difeafe in a great proportion of cafes foon fhews itfelf in the fyftem.

The moft certain, as well as the fpeedieft cure of chancres is to be obtained from a due attention to external applications conjoined with a well-regulated courfe of mercury. By the former we are frequently

ly enabled to complete the cure in a few days, which otherwiſe would require a great length of time, and by the latter the conſtitution is rendered perfectly ſecure.

Chancres in an incipient ſtate are moſt effectually cured by the application of cauſtic or eſcharrotics. If the diſeaſed parts are completely deſtroyed with cauſtic they ſoon become clean, and heal as quickly as ſores proceeding from any other cauſe and of the ſame magnitude uſually do. This practice is now therefore very generally adopted, and the effect of it is ſo remarkable that it has never probably been laid aſide by any who have given it a fair trial. None, I imagine, have purſued it more fully than I have done; but I find it neceſſary to remark, that in the uſual way of conducting this practice it is liable to one very important objection: the chancres to which it is applied, if they are not of long duration, very commonly heal quickly; but in a great proportion of caſes the cure of the

ſores is ſucceeded by buboes in the contiguous glands. For a conſiderable time I was induced to ſuppoſe that the ſwellings of the glands which thus took place after the cure of chancres were more the effect of accident than of the method of treatment, and that they would have occurred under whatever management the ſores might have been. The frequency, however, of their appearance made me at laſt ſuſpect that I was miſtaken, and farther obſervation made it obvious that this was the caſe.

As experiment alone could determine the queſtion, I was reſolved to employ this teſt. Of the firſt twenty patients who occurred with incipient chancres, in ten they were deſtroyed by an immediate and effectual application of lunar cauſtic, the remedy being employed according to my uſual cuſtom at that time, inſtantly on my being called. Of the other ten, five were dreſſed with blue mercurial ointment, and five with common wax ointment. The ſores to which cauſtic were applied

applied healed much fooner than the others, and next to thefe the fores that were dreffed with mercurial ointment. But of the ten patients to whom cauftic was applied no lefs than eight had buboes, while only one bubo occurred in all the others, and it happened in one of the patients whofe chancres had been dreffed with mercury. I thought alfo that buboes appeared to be lefs frequent from the application of cauftic where mercury had been previoufly given. This fell within my obfervation from time to time with patients who had taken mercury either of their own accord or by the advice of others, and appearing to be of importance I was refolved to bring it likewife to the teft of experiment, and the refult was as follows: Of forty-eight patients with chancres in an incipient ftate, and exactly as they occurred in practice, one half was treated in the manner I have mentioned, by deftroying the chancres with cauftic immediately on my being defired to fee them, while all the others

were put under mercury for eight or ten days before the application of cauſtic. In every other circumſtance the method of treatment was the ſame. The difference, however, ſurpriſed me exceedingly. Of the twenty-four treated with the immediate application of cauſtic twenty were ſeized with buboes, while only three buboes occurred in an equal number to whom mercury had been previouſly adminiſtered.

Theſe buboes did not indeed all terminate in ſuppuration, nor did many of them arrive at any conſiderable ſize. Being cloſely watched, mercury was immediately applied for the purpoſe of diſcuſſing them, and for the moſt part it proved ſucceſsful; but there was no cauſe to doubt of their being venereal from their being equally difficult to manage, and from thoſe which ended in ſuppuration being equally difficult to cure with buboes which occur in the ordinary courſe of buſineſs. At firſt I was induced to hope that ſwellings produced in this manner were not venereal, but merely the effect of irri-

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tation excited by the cauftic, but it foon became obvious that this was not the cafe, and that cauftic does not deftroy the venereal virus fo compleatly as is commonly imagined, while, by the irritation which it always in fome degree excites, it tends often to produce buboes, which otherwife would never take place. This affords an additional proof to what has already been mentioned of the effect of irritation in exciting the action of the abforbents; and the effect of mercury in this cafe, by preventing the formation of buboes, tends farther to fupport the opinion of this medicine acting as an antidote to the fyphilitic virus.

In moft inftances buboes produced in this manner begin to form in the courfe of a day or two after cauftic has been applied; in fome cafes even fooner. But I have known them take place where the glands had remained found for a good many days after the chancres were compleatly cicatrifed, and where there was no reafon therefore to fufpect that any excit-

ing cauſe of buboes could remain. In theſe inſtances I conclude that ſuch a ſmall portion of the virus had been lodged in the lymphatics forming the gland, as required this length of time to excite that degree of irritation that is neceſſary for the production of bubo.

The ſame effect appears to reſult from whatever cauſtic is employed; at leaſt this has been the caſe with ſuch trials as I have made with lunar cauſtic, red precipitate, blue vitriol, and corroſive ſublimate; and as the cauſtic is more eaſily applied, while it commonly acts with more certainty, and perhaps with leſs pain than any of the others, I commonly give it the preference. Where cauſtic is to be employed, my practice now is to put my patient previouſly under mercury for the ſpace of ſix, eight, or ten days, till there is full evidence of the medicine having entered the ſyſtem. At this time cauſtic is applied over the whole ſurface of the chancre, however extenſive it may be, in ſuch a manner as to deſtroy all the

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diſeaſed parts, and the application is renewed as often as the ſores become foul or ſloughy. In ſome it is not neceſſary to uſe it above once or twice, while in others it muſt be repeated every ſecond or third day, during a great part of the cure. Even where the ſores have become clean cauſtic often proves uſeful, particularly when they are ſtationary, and make no progreſs towards a cure; in which caſe we may commonly make them cicatriſe more ſpeedily by the reiterated application of cauſtic than by any other remedy.

When chancres are brought into a clean healing ſtate a cure will for the moſt part be obtained by continuing the uſe of mercury for a ſufficient length of time, and by dreſſing with dry lint, or any ſimple ointment; but that fixed or ſtationary ſtate to which I allude, and in which they often remain where cauſtic is not frequently applied, is very effectually prevented by dreſſing with precipitate or calomel ointment; and in ſome

cafes I have employed for the fame purpofe an ointment prepared with verdigris *.

In all cafes of chancres the parts ought to be kept particularly clean, and the beft ordinary wafh for this purpofe is a weak folution of corrofive fublimate, in the proportion of one grain to feven or eight ounces of water. Where the fores remain foul notwithftanding the application of cauftic, but which does not often happen where a fufficient quantity of mercury is given along with it, it becomes neceffary to employ a folution with a greater proportion of fublimate. In this cafe one, or even two grains, may be added to an ounce of water; but this being too ftrong for applying to the contiguous parts, care muft be taken to confine it as much as poffible to thofe that are difeafed. In this foul or floughy ftate of chancres, among the variety of dreffings which we are occafion-

* Formulæ of thefe ointments are given in the Appendix, Nos. 26, 27, and 28.

ally

ally obliged to employ, the blue ointment prepared with equal parts of mercury and hogs-lard ſometimes anſwers well, as it does indeed in almoſt every ſtate of chancre in which it is proper that mercury ſhould be uſed. For the purpoſe too of removing this foul appearance which chancres are very apt to aſſume, and under which they never heal, red precipitate finely levigated is often employed in powder, and frequently with advantage. Calomel applied in this manner alſo proves uſeful; and it is chiefly in this ſtate of chancres that I have perceived moſt advantage to be derived from mercurial fumigations. In all ſlight caſes of chancres a free application of cauſtic very commonly proves ſucceſsful; but where the ſores are deep, extenſive, and very ſloughy, together with the uſe of cauſtic we are obliged to employ one or other of the articles which I have mentioned; and when precipate, calomel, and even verdigris have failed, I have in various inſtances found that the parts have been rendered clean, and

and brought into a healing ſtate, by fumigating once or twice with cinnabar.

There are two ſtates, however, of chancre which do not admit of this mode of treatment, viz. where the parts affected are either much inflamed, or ſhow ſome tendency to mortification. In all other ſituations, whether the ſores be upon the glans, prepuce, or frenum, or even within the mouth of the urethra, cauſtic may be applied with freedom. It may be proper here to remark, that when a chancre is ſeated upon the frenum, or beneath it, if it is not altogether ſuperficial, the frenum itſelf ſhould be cut acroſs. It is eaſily done, no inconveniency is experienced from it, and it tends always to forward the cure.

When the parts upon which chancres are ſeated become much inflamed, ſuch remedies ſhould be employed as prove moſt effectual in removing inflammation. When the patient is plethoric, blood-letting in ſome inſtances is neceſſary, together with cooling laxatives, and a low diet. The parts ſhould be dreſſed with

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any ſimple ointment, ſuch as the common ſaturnine ointment and wax liniment mentioned in the Appendix *. In ſuch circumſtances too ſaturnine poultices prove ſometimes uſeful; but nothing ever gives more relief than the internal uſe of opiates. By allaying irritation they frequently tend more effectually than any other remedy to leſſen or remove the inflammation.

In ſome caſes, however, notwithſtanding all our attention, this inflammatory ſtate of chancres terminates in gangrene, while in others gangrene takes place where no great degree of inflammation had been previouſly obſerved. In theſe oppoſite circumſtances the remedies to be employed ought evidently to be different. Where much inflammation ſtill prevails, blood-letting with other parts of an anti-phlogiſtic courſe ought to be puſhed as far as the ſtrength and age of the patient can with ſafety admit, while a plenti-

* Vide Nos. 29 and 30.

ful

ful ufe of bark is perhaps the beft remedy where little or no inflammation occurs.

For the removal of inflammation, befides general blood-letting, I have occafionally ventured upon the application of leeches to the difeafed parts, and commonly with much advantage. The bites of leeches may in fome inftances give rife to venereal ulcers, which otherwife would not have taken place, but little or no difvantage enfues from this, as they heal by the ufe of the mercury that we muft neceffarily employ for the cure of the difeafe, while nothing proves fo effectual as local blood-letting, for carrying off that great degree of inflammatory tenfion which in cafes of this defcription we fometimes meet with.

Whether inflammation takes place or not, gangrene, when it arifes from chancres, proceeds with more rapidity than it ufually does from any other caufe. I have known a confiderable part of the glans deftroyed by it in the courfe of a

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day. For the moſt part, if not immediately checked, either by general or local blood-letting, or by a liberal uſe of bark, according to the nature of the caſe, it proceeds without our being able to put a ſtop to it till it comes to the urethra. In different inſtances I have known the urethra laid entirely bare for a conſiderable length on the mortified parts being removed; and where it begins upon the preputium, it proceeds in ſome caſes not only through the looſe ſkin and cellular ſubſtance of the penis but even into the corpora cavernoſa.

The moſt diſtreſsful ſymptom which takes place from the mortification of theſe parts is the vent which it ſometimes gives to the urine by penetrating the ſubſtance of the urethra. In ſome inſtances one opening is formed; in others we meet with two, three, or more. Beſides the inconveniency and diſtreſs which this always occaſions it adds conſiderably to the hazard of the patient, for the urine in this manner finds acceſs to the ſurround-

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ing cellular ſubſtance, where it not only gives much additional pain, but the irritation which it excites ſeems to be of a nature particularly apt to create a diſpoſition to gangrene, ſo that whenever it takes place the mortification extends more rapidly than it did before, nor has bark and the other remedies uſually given much influence in putting a ſtop to it. We derive moſt advantage from opium. Whether opium acts here as an antiſeptic may be difficult to aſcertain: I rather ſuppoſe that it proves chiefly uſeful by leſſening or removing the irritation produced by the urine, for I have not perceived that its beneficial effects are in proportion to the quantity that is given. Small doſes, when they procure eaſe, ſeem to prove equally uſeful with the largeſt, which they would not probably do if they acted in any other manner. While by means of opiates we endeavour to leſſen the pain, much care ſhould be taken to prevent the urine from finding acceſs to the contiguous parts. Where it happens to lodge, the

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ſac which receives it ſhould be laid freely open, and the parts bathed with a decoction of bark, an infuſion of roſe leaves, or ſome other antiſeptic after every time the patient voids urine.

I have taken the more particular notice of this effect of urine upon parts in this ſituation as I do not find that it has been mentioned by others, and as various caſes have fallen under my care in which the moſt diſtreſsful conſequences enſued from it.

Chancres are particularly apt to become gangrenous when combined with paraphymoſis, but they do ſo occaſionally where no degree of this ſymptom has ever occurred.

The moſt alarming ſymptom of this ſtate of chancre is the hæmorrhagy which occurs when the mortification reaches the large arteries of the penis. No advantage is derived from tying theſe arteries with ligatures till the gangrene is completely ſtopped; ſo that in this ſituation we are obliged to truſt to the uncertain effects of

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aſtringent applications conjoined with moderate preſſure. Preſſure in this caſe is moſt effectually applied by means of a fillet of linen or cotton, paſſed round the penis, after a leaden or ſilver tube has been inſerted into the urethra.

The point of moſt importance in this ſtate of the diſorder is to determine the propriety of giving mercury, or delaying the uſe of it till the mortification is over. It is the common practice to continue the mercury that had previouſly been given for the chancres, and many even judge it neceſſary to give it in greater quantities. In every inſtance, however, where I have known this done, it has evidently proved hurtful; and having found from various trials that the mercury may with ſafety be laid aſide during the progreſs of the mortification, I now never employ it till all the mortified parts are removed. The fear of the diſeaſe gaining ground from this, and an opinion of the mortification being of a venereal nature, and that mercury is therefore neceſſary to ſtop it,

it, is the cause of its being in general persisted in; but the progress of mortification is so rapid, when compared with the usual symptoms of syphilis, and it is in every circumstance so different in appearance from these that I do not conceive it to be venereal. It is indeed evidently induced by this disease; but in this respect the syphilitic virus seems to act in no other manner than as the occasional cause; and chancres being at first always local, I believe, that in most instances the sore which remains after the mortification is gone is not venereal, and that it would heal whether mercury should be given or not, in the same manner as would happen with a great proportion of chancres where caustic has been freely applied on their first appearance. But as we cannot in either case know with certainty whether the virus has entered the system or not, the safety of our patient requires in both instances that mercury should be given in such quantities as may be necessary to effect this purpose. While mortification conti-

nues to advance it ſhould be treated in the ſame manner with gangrene from any other cauſe, and without any regard to the venereal diſeaſe; but as ſoon as the mortified parts are removed, the caſe ſhould be conſidered as entirely venereal; a courſe of mercury ſhould be adviſed and continued from a fortnight to three weeks or a month, according to the virulence and obſtinacy of the ſymptoms after the ſores are cicatriſed.

I have ſeldom, however, found it neceſſary to diſcontinue mercury during the inflammatory ſtate of chancres. Even where inflammation runs high mercury may be ſafely given. By leſſening the venereal irritation, it tends for the moſt part to abate, and even to remove the inflammation, ſo that I commonly preſcribe it immediately, and perſiſt in the moderate uſe of it during the whole continuance of this ſymptom.

After the inflammation produced by chancres is gone they fall to be treated in the ſame manner as if this ſymptom had

had not taken place. When they are clean, and with a furface difpofed to granulate and heal, any common ointment will anfwer for dreffing them, but when foul or floughy the application of cauftic, calomel, precipitate, and verdigris are equally proper as if the inflammation had not happened. Verdigris may not only be applied to chancres in powder, and in the form of an ointment, but in folution; and it equally tends to remove that floughy foulnefs to which I allude, and difpofes the fores to heal when they become ftationary. It may be ufed in various proportions, from two grains to a fcruple in the ounce of water.

In this clean ftate of chancres, when the cure does not advance, the application of fpirit of lavender, ardent fpirits, or even of alcohol, proves fometimes ufeful; and in fome cafes we derive advantage from bathing the parts with lime water, a folution of blue vitriol, traumatic balfam, or tincture of myrrh.

One of the greateſt impediments to the cure of chancres is their taking place whether on the inſide of the prepuce or upon the glans, along with phymoſis; for when they cannot be kept clean and dreſſings properly applied, the cure proves always both tedious and uncertain. In all ſlight caſes of chancre in this ſituation we endeavour to cure them by injecting from time to time, between the prepuce and glans, one or other of the articles I have juſt mentioned ſufficiently diluted; but when the ſores are either deep or extenſive, the operation for the phymoſis ſhould always be adviſed as the firſt part of the cure *. This being a meaſure to which a patient does not readily aſſent it is commonly poſtponed, by which a great deal of time is loſt, and chancres often allowed to proceed deep into the ſubſtance of the penis, which might eaſily have been healed without the hazard of this being incurred.

* Vide Chapter III. Section XII.

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When an operation for this purpose becomes necessary the prepuce should be divided through its whole length. We are commonly desired to carry the incision only the length of the chancres, but in different instances I have perceived bad consequences ensue from this. The undivided skin is apt to inflame and become tight, and the pain from the operation being nearly the same, the other as being more effectual and not productive of these inconveniencies, should be preferred.

When the cure, however, is conducted without the prepuce being laid open, besides a very regular attention to cleanliness care should be taken to prevent adhesions between the preputium and glans; a circumstance particularly apt to happen when much inflammation takes place, and from which a good deal of inconveniency is afterwards experienced. This is most effectually prevented by making such liquids as are injected pass freely round the whole substance of the glans, and inserting pledgits with proper dressings, and placing them

between the prepuce and thoſe parts of the glans that are affected.

Chancres in the parts of generation of women require the ſame method of treatment as in men. The parts do not appear to be ſo irritable, ſo that they more readily admit of the eſcharrotic applications which I have mentioned. In both ſexes the cure is much promoted by confinement, while nothing tends more to retard it than the fretting of the parts by motion in walking or riding on horſeback.

Where venereal ſores form upon the mons veneris and external parts of the labia pudendi, or when chancres ſpread to theſe parts, as they ſometimes do from the nymphæ and clitoris, where they often begin they are commonly more foul and ſloughy than venereal ſores in any other ſituation: Neither are they ſo readily cleaned by the uſual dreſſings. Beſides a more frequent application of lunar cauſtic they require any eſcharrotics that we employ to be uſed in powder inſtead of being mixed with ointments.

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They even admit of being covered from time to time with levigated verdigris; nor have the milder articles of this clafs, fuch as calomel and red precipitate, the fame influence in keeping them clean that we find them to have in venereal fores in almoft every other part. It is proper, therefore, in the treatment of fores upon thefe parts, that this circumftances be kept in view.

Lunar cauftic is the beft application for chancres upon the lips. In this fituation ointments cannot be conveniently employed, we therefore truft almoft entirely to the repeated application of cauftic; but in chancres upon the nipples the application of cauftic creates fo much pain that it ought never to be advifed. We are therefore in thefe parts obliged to employ the milder dreffings, and nothing anfwers better than the common faturnine ointment, or wax ointment, with a fourth part of calomel. Some advantage is alfo derived from bathing the parts affected with a ftrong folution of opium in water.

It leſſens irritability, by which the ſores are more readily diſpoſed to heal.

§ 2. *Of the Cure of Buboes.*

A HISTORY of the riſe and progreſs of bubo has already been given in Sect. II. of this Chapter, p. 26.

Our treatment of bubo has varied and been improved by the more perfect knowledge which of late years has been obtained in the anatomy of the lymphatic ſyſtem. Till this was acquired buboes were conſidered as an effort of the ſyſtem to throw off the morbific matter of the diſeaſe, ſo that in every inſtance to promote their ſuppuration was thought to be neceſſary; but now that it is known that they are not produced by any diſeaſe of the conſtitution; that they originate from a ſtoppage of the ſyphilitic virus in its progreſs to the common courſe of the circulation; that by bringing mercury into contact with the virus while in this ſitua-

tion

tion we can render it totally inert; and that ſores the conſequence of the ſuppuration of buboes are difficult of cure, we do not heſitate to ſay that it is the beſt practice to prevent the formation of matter, and by a proper application of mercury, combined with other means, to procure a diſcuſſion of every tumour of this kind.

But although the advantages of this practice are obvious to all who have given it a proper trial, ſtill there are many who have not adopted it, as thinking that they leſſen the hazard of the patient by inducing ſuppuration in the ſubſtance of the gland, and afterwards diſcharging the matter the conſequence of the inflammation induced by the obſtruction.

We muſt indeed acknowledge that this reaſoning would have every appearance of being well founded, and that the practice of curing buboes by diſcuſſion ought certainly to be exploded, was it to be accompliſhed by forcing the matter of infection into the ſyſtem, but as we have it in our power by a proper uſe of mercury

cury entirely to deſtroy the nature of the matter lodged in the obſtructed gland, and as we know from daily obſervation, that when accompliſhed in this manner the diſcuſſion of buboes can never be productive of danger, it ought in all caſes to be adviſed.

The diſcuſſion of theſe tumours might often be in our power by other means than the direct application of mercury to the matter of infection; but we act with more certainty of doing no harm to the conſtitution by firſt deſtroying the active property of the matter in the obſtructed gland, and truſting afterwards to a proper courſe of mercury for obviating the effects of any part of the virus that may have paſſed into the ſyſtem.

On the firſt appearance of a bubo mercury ſhould therefore be applied ſo as that it may with moſt certainty paſs into the obſtructed gland. Hence it ſhould be chiefly applied to thoſe parts lying between the bubo and the ſpot at which the matter of infection was abſorbed; but in the ordinary

dinary ſeat of buboes the ſpace lying between theſe points is not ſufficient for the quantity of mercurial ointment that muſt be employed. Where buboes form in the arm-pit, or in the fore part of the thigh from venereal ſores in the hand or feet, this may at all times be done; but when ſeated in the groin, beſides rubbing the ointment upon the parts lying between the chancres and the ſwellings, we alſo apply it along the inſide of the thigh and leg. When the practice of diſcuſſing buboes with mercury was firſt introduced the ointment was chiefly rubbed upon the tumour, and in many inſtances a mercurial plaſter was kept conſtantly applied to it; we find, however, that the mercury paſſes with much more certainty into the gland by applying it to thoſe parts from whence the lymphatic veſſels forming the gland take their origin.

But although a mercurial plaſter applied upon the gland ſeems to do harm, by the heat and irritation which it excites, I am of opinion that a ſmall portion

of

of the ointment which we employ ſhould be rubbed upon it. Although none of it ſhould by this route paſs directly into the ſubſtance of the gland, ſtill it will go into the ſyſtem, and the diſcuſſion of the tumour is in many inſtances evidently promoted by gentle friction applied to it.

In our application of mercury for the purpoſe of making it paſs through a particular gland it is evident that a knowledge of the courſe of the lymphatic veſſels is a matter of importance; but we cannot always apply it, as we have already obſerved, to thoſe parts from which the greateſt number of lymphatics of the contiguous glands originate. Thus in women, where the bubo is ſometimes ſeated within an inch or ſo of the ſeat of infection, which is the caſe where the glands upon the round ligaments become obſtructed, as the lymphatics forming theſe glands ariſe perhaps chiefly from the tender ſkin of the labia pudendi, we cannot with propriety apply the ointment to theſe parts; nor can we in moſt inſtances in the treatment of buboes in men take

the advantages of thoſe lymphatics which originate in the glans penis in the internal ſurface of the prepuce or ſcrotum; at leaſt wherever I have attempted to do ſo, however gently the friction was applied, ſo much irritation was induced by it that there was an evident neceſſity for deſiſting. In the ſcrotum it is very apt to excite a fretful itchy eruption, and a conſiderable degree of uneaſineſs. In all theſe ſituations, therefore, we muſt apply the ointment to the more firm ſkin of the contiguous parts.

When the full quantity of mercury to be employed can be rubbed upon the leg and thigh of that ſide in which a bubo is ſeated it ought certainly to be done, but the cure of the diſeaſe often requires a greater quantity of the ointment than can be uſed in this manner. In ſuch caſes we commonly apply it to the other thigh, but it may with equal ſafety and advantage be rubbed upon the arms or any part of the body.

From

From what has been ſaid, it will appear that we depend chiefly upon a proper application of mercury for the diſcuſſion of buboes; but we ought by no means to truſt entirely to this. When the patient is plethoric he ſhould immediately loſe blood, in quantity proportioned to his ſtrength, and his bowels ſhould be opened by a briſk purgative. It proves ſometimes ſerviceable to repeat the purgative once and again: Cold ſaturnine poultices ſhould be applied to the tumour: The patient ſhould be kept at perfect reſt: His diet ſhould be moderate; and where much irritation prevails opiates ſhould be given in ſuch doſes as are ſufficient for removing it. I think it right indeed to obſerve, that in the treatment of buboes much advantage may be derived from the uſe of opiates, and that mercury will often fail if we do not at the ſame time leſſen or remove the irritation and pain, for which nothing anſwers with ſuch certainty as the internal uſe of opiates combined with a frequent renewal of cold ſaturnine

turnine applications. In ſome inſtances I have made trial of local blood-letting by means of leeches for the diſcuſſion of venereal buboes, and in ſome caſes with advantage. In others, however, it has not proved ſo ſerviceable as this remedy commonly does in ſwellings of theſe parts that proceed entirely from inflammation. On the contrary, the irritation excited by the bites of theſe animals has in ſome appeared to do harm.

By a proper application of the remedies that have been enumerated we endeavour to carry off any inflammation that may have taken place in the tumour, while by a due continuation of mercury we ſecure the ſafety of the conſtitution. The length of time to which a courſe of mercury ſhould extend for this purpoſe can only be aſcertained by the effects which reſult from it. It ought always, however, to be continued till the ſwelled gland is nearly reduced to its natural ſize; and when chancres take place along with it the mercury cannot with ſafety be laid aſide till the ſores have been cicatriſed for two

or

or three weeks. But in attending to the difcuffion of the tumour we have no reafon in any cafe to expect that it will be reduced altogether to its ufual fize; for lymphatic glands when fwelled from this caufe commonly remain for a great length of time, and in fome inftances during the life of the patient, fomewhat more full and prominent than they were before. All we have to expect therefore is, that they fhould fall nearly to their natural fize, and be entirely free of pain. This being accomplifhed, if no chancres or other fymptoms of the difeafe exift, and if the full effect of the mercury has been kept up, it may with fafety be left off at the end of a fortnight.

In buboes altogether venereal we commonly fucceed in removing them by difcuffion, where the patient applies in due time and gives that attention which he ought to do to the application of the remedies; but in various inftances we fail, and notwithftanding all our endeavours, the tumour proceeds to fuppuration. This may

may take place from various cauſes, but it happens chiefly from patients delaying too long to aſk for aſſiſtance; from their improper manner of living, and being allowed to walk about when they ought to be confined; from their not applying the mercury with that care and attention which it requires; and in many inſtances from the patient being of a ſcrophulous conſtitution; by which, although the ſyphilitic virus may be removed or deſtroyed by the mercury, ſtill it is not ſufficient for the purpoſe of carrying off that tendency to the formation of matter in the gland which the virus has produced.

As ſoon as a bubo ſhews any tendency to ſuppurate, it is the practice with many to endeavour to promote the formation of matter as ſpeedily as poſſible; but I have not found that there is any good reaſon for this. By ſtill proceeding with an attentive application of mercury, and with the uſe of cold applications, we frequently ſucceed in the diſcuſſion of theſe tumours af-

ter they have arrived at a confiderable bulk, and in fome inftances even after fome partial fuppuration has taken place. Neither does any harm occur from the practice when it does not fucceed; for although complete fuppuration fhould afterwards take place, we do not perceive that the procefs is retarded by the mercury having been continued, while the fores which enfue heal more kindly than they ufually do where the mercury has been previoufly laid afide. By fome we are told, that the ufe of mercury, during the formation of matter in buboes, ought never to be advifed; but although I have paid much attention to the fubject I have never perceived that in any inftance it has done harm, while, befides other advantages, it faves a good deal of time which otherwife would be loft. Even where the formation of matter has taken place to a confiderable extent, and where it is therefore proper to promote the complete fuppuration of the tumour by the frequent renewal of warm emollient poultices and fo-

fomentations, ftill there is no neceffity for defifting from the ufe of mercury, which ought to be continued without interruption till a fufficient quantity is employed for the fafety of the conftitution. It does not prevent the fuppuration from going forward; and the fores which enfue from the difcharge of the matter heal more readly, as we have already obferved, when no interruption has been given to the exhibition of mercury.

When buboes have come to a ftate of fuppuration it is a queftion with fome whether they fhould be opened or not, for many have obferved that they frequently heal eafily when they are allowed to burft, by which the pain and terror of the operation is avoided. The refult of my obfervation has been, that when buboes do not arrive at any great fize we fhould proceed with the ufe of mercury till they burft of themfelves, unlefs where the teguments are unufually thick; but when the fubftance of the gland is entirely fuppurated, as the matter, if thickly covered,

would be a long while in getting out, and as it might in the mean time infinuate among the furrounding parts, in order to prevent the inconveniences which this would induce, we ought certainly to make an opening into it; and in all cafes of large buboes we fhould not hefitate in advifing them to be opened.

Our object in opening buboes fhould be nearly the fame as in other purulent collections. Such an opening fhould be made as will afford a free vent to the matter, but there is no neceffity for making it larger. In very large buboes, indeed, the teguments are apt to be fo loofe and flabby, and the texture of the fkin fo much deftroyed, that the cure would be rendered tedious was the fkin allowed to remain. In fuch cafes I fometimes difcharge the matter with cauftic, applied in fuch a manner as to deftroy any part of the teguments that appear to be fuperabundant. This, however, is not often neceffary; and for the moft part I have found that an opening made from the centre of the

the tumour, where the matter commonly points down to the moſt depending part of it, is perfectly ſufficient. Even a ſmaller opening than this would often anſwer; but it is better to make it of a ſufficient ſize at once than to be obliged to repeat a very painful operation perhaps once and again, as is often neceſſary where buboes of a large ſize are opened with ſmall inciſions. I need ſcarcely obſerve that the opening ſhould in every inſtance be continued down to the moſt depending point of the collection. From want of ſufficient attention to this we meet with daily inſtances of the matter being allowed to collect, and in this manner to find acceſs to the contiguous parts, by which a great deal of diſtreſs is induced, which, with due care at firſt, might eaſily have been prevented.

This I may obſerve is a point of the firſt importance in the treatment of buboes, but it does not often meet with that attention which it merits. Patients under mercury being for the moſt part highly

irritable, they ſeldom ſubmit eaſily to have buboes properly opened; ſo that although the lancet may be entered at the moſt prominent part of the tumour, which it ought always to be, the practitioner, if not firm and reſolute, is often prevented from carrying it to the moſt depending part of it, by which ſome ſpace is left for the lodgement of matter; and however ſmall this at firſt may be, it ſeldom fails of becoming more extenſive. This again gives riſe to a great extent of ulcer, or to the formation of ſinuſes, which very conſtantly prove the ſource of much pain to the patient, and of diſtreſs and embarraſsment to the ſurgeon.

When ſinuſes in this ſituation are ſuperficial, and run little deeper than the ſkin, they are eaſily managed. No riſk is incurred in laying them open, by which, if the conſtitution is healthy, a cure will be obtained on a ſufficient quantity of mercury being given; but they ſometimes run deep, and paſs ſo near to the large blood-veſſels of theſe parts, that no attempt

tempt of this kind can with ſafety be made. In ſuch circumſtances all that art can in general do is to preſerve the external opening of the ſinuſes ſufficiently large, and by regular and equal preſſure at the different dreſſings, to prevent as much as poſſible the matter from lodging. In ſome inſtances I have derived advantage from inſerting, from time to time, a piece of cauſtic to the bottom of a deep ſinus, and applying it gently over the whole internal ſurface of the ſore. In others, the inſertion of a ſmall portion of ointment impregnated with red precipitate has proved uſeful. By removing the ſloughs with which the ſurface of theſe ſinuſes are commonly covered, they thus excite a diſpoſition over the whole to granulate and unite.

When buboes come forward to full maturation without much injury being done to the ſkin, I have, in different inſtances, diſcharged the matter by the introduction of a ſmall cord or ſeton, and the practice has ſucceeded. This requires,

however, the teguments to be firmer than they commonly are when a bubo is ready to be opened.

It is univerſally admitted that it is of much importance to prevent the air from finding acceſs to ſores; and as we ſometimes obſerve buboes ooze out the matter which they contain by a number of ſmall openings, and as theſe openings commonly heal eaſily, I conclude that they do ſo from their being ſo ſmall as to exclude the air entirely. In different inſtances, I have attempted to imitate nature, by making a number of ſmall punctures with the point of a lancet over the whole extent of the bubo, and for the moſt part with ſucceſs. The matter in this manner comes ſlowly off; the ſides of the abſceſs contract gradually; and when completely emptied, we find the whole parts that have been affected ſufficiently firm without any ſores or ſinuſes remaining.

When the patient has taken a ſufficient quantity of mercury, if the conſtitution in other reſpects is ſound, the ſore in moſt in-

inſtances heals eaſily, merely by dreſſing with common cerate, and by that attention to cleanlineſs which in the treatment of ſores of every deſcription is neceſſary. It often happens, however, that the cure of theſe ſores proves tedious, notwithſtanding all the attention that we can give to them. Their edges become hard, livid, and often retorted; the matter thin, ſharp, and fœtid; and inſtead of healing, the ulceration gradually extends, or, if it heals in ſome parts it breaks out in others, giving a honey-comb appearance to all the contiguous parts. In ſome inſtances the tendency to this depaſcent kind of ſore is ſo great that it ſoon ſpreads over all the under part of the abdomen, and upper parts of the thigh; in ſome caſes by the matter being ſo acrid as to corrode and deſtroy all the contiguous parts with which it comes in contact, and in others by ſpreading beneath the ſkin, and burſting out from time to time in a variety of ſmall ulcers.

The

The ſituation of patients with ſores of this deſcription is often very deplorable. The pain with which they are attended is commonly ſevere; the acrid matter which they afford being abſorbed, hectic fever is thereby induced; the patient becomes hot and reſtleſs through the night; and almoſt a total want of appetite renders them ſoon much emaciated.

In ſuch circumſtances cicuta has ſometimes proved uſeful; and in different inſtances the ſores have been healed by it when no advantage was derived from any kind of ointment. In theſe caſes it was applied in the form of poultices, commonly by mixing the juice of the freſh herb with emollient cataplaſms. I have alſo obſerved that the recent expreſſed juice has, for internal uſe, proved more effectual than any other form of it. I have employed hyocyamus and belladona fully, but ſeldom with any material advantage. Neither have I in theſe caſes obſerved any obvious benefit from ſarſaparilla; but in different inſtances mezereon, guiacum,

and

and ſarſaparilla combined have proved uſeful, when exhibited in the manner I have already mentioned.

The moſt effectual courſe, however, which I have employed, is the application of cauſtic round all the edges and hardened parts of the ſores, conjoined with the internal uſe of opium. For a conſiderable time I truſted entirely to dreſſings of the emollient kind, being afraid of irritating parts already highly ſenſible. In ſome caſes a ſaturnine ointment has proved ſucceſsful, and in others the common calamine cerate has anſwered; but in moſt inſtances, on thoſe days in which cauſtic is not applied I have found more advantage from dreſſing with ointments prepared with a conſiderable proportion of calomel, red precipitate, or verdigris *. In ſome caſes it is neceſſary to ſprinkle theſe articles over the ſores in the form of powder, but for the moſt part they are ſufficiently powerful when mixed with ointments.

* Vide Appendix, Nos. 26, 27, 28.

Inſtead of exciting pain, as thoſe not accuſtomed to uſe them are apt to ſuſpect, they commonly remove it; and they ſeldom fail to alter the diſcharge from a thin acrid ſanies, to a well digeſted pus.

The application of lunar cauſtic indeed always excites pain at firſt, but this ſoon ſubſides, eſpecially when the internal exhibition of opium is adviſed along with it. Indeed opium of itſelf proves often uſeful in ſores of this deſcription, not by acting, as ſome have imagined, as an antiſyphilitic remedy, but by removing, as I have already had occaſion to obſerve, that pain and irritation with which ſores diſcharging acrid matter are uſually accompanied. By removing this ſtate of irritability it deſtroys the diſpoſition in the veſſels of the ſore to form that kind of matter, which, by its own acrimony, ſerves to perpetuate the ulceration; and this being accompliſhed, when no other interruption takes place, nature alone ſeldom fails to complete the cure.

In ſome inſtances I have known ſores in this ſituation which reſiſted every other remedy ſoon healed by being fumigated from time to time with cinnabar: In others warm ſalt-water bathing, and afterwards the ordinary form of ſea bathing has proved uſeful; while in ſome a cure has not been obtained but with an entire change of regimen. Where the patient has previouſly lived upon milk and vegetables a moderate allowance of wine and animal food has proved ſerviceable, while thoſe who have previouſly been accuſtomed to full living have derived much advantage from a diet conſiſting altogether of vegetables and milk. In all ſuch caſes country air proves particularly uſeful.

Where mercurial fumigations are employed for the cure of theſe ſores they ſhould be conveyed to the parts affected by metallic tubes, and kept applied to them for the ſpace of twenty-five minutes or half an hour at once, and this ſhould be repeated every ſecond or third day for ſix or eight times.

For

For ſome time paſt I have been making trial of the muriated barytes, a remedy lately brought into notice by the ingenious Dr. Crawford of London †. Theſe trials have been chiefly confined to ſores and tumours produced by ſcrophula, but I have alſo made uſe of it in ſome of thoſe ſpreading ulcers which we are now conſidering, after there was no cauſe to doubt of the ſyphilitic virus being eradi-dicated, and in ſome inſtances I think with advantage. I have not as yet, however, given it in a ſufficient number of caſes to be able to ſpeak of it with preciſion.

Beſides this ſtate of bubo there is another which in ſome inſtances proves very diſtreſsful, in which the tumour, after arriving at a conſiderable bulk, remains nearly ſtationary, and ſhews no tendency either to ſuppurate or diſſolve, notwithſtanding of all the remedies we may employ.

† Vide Appendix, No. 32.

For

For the moſt part this indolent ſtate of bubo depends upon the patient being of a ſcrophulous conſtitution; but whatever may be the cauſe, our firſt object ſhould be to employ that quantity of mercury which may appear to be neceſſary for rendering the ſyſtem ſafe.

Unction affords here likewiſe the beſt form of uſing mercury; by making it paſs through the diſeaſed parts diſcuſſion of the tumour is more readily accompliſhed than when the medicine is given by the mouth. Even this, however, will in ſome inſtances be continued without any advantage for a great length of time. In ſuch circumſtances I have in various caſes adviſed bliſters to be repeatedly applied over the tumours. They never do harm, and in ſome caſes they have proved evidently uſeful. In others electricity has proved ſerviceable, but it is neceſſary to continue it for ſeveral weeks in order to judge of its influence; and it ought to be continued longer at each time of applying it than is uſually done. In four

caſes of indolent tumours where electricity proved ſucceſsful, and two of theſe were of the kind we are now conſidering, no advantage was derived from the common way of uſing it. In all of theſe it was applied for the ſpace of half an hour at once; this was repeated three times a-day, and at each application ſparks were not only taken from the ſurface of the tumours, but gentle ſhocks were paſſed through them. For the firſt two or three weeks ſcarcely any alteration was perceived in any of them, but they all decreaſed ſuddenly at laſt. One of them of conſiderable ſize, which had been of eight months duration, and in ſome parts of which matter ſeemed to have formed, was reduced to the fourth part of its bulk in the courſe of a few days from the period at which it began to diminiſh. In this ſtate of theſe tumours a long continued uſe of cicuta proves ſometimes ſerviceable; and I have ſeen evident advantages from ſea-bathing, and from drinking as much ſalt water daily

daily as the patient can bear without being much purged.

Before entering upon the uſe of cold bathing I have in ſome caſes adviſed warm ſalt water to be poured upon the ſwelling morning and evening, for the ſpace of two or three weeks, and for the moſt part it has appeared to prove uſeful.

In the courſe of time buboes in this ſtate ſometimes become ſoft, and ſhow a tendency to ſuppurate, although they may not have done ſo before. It is here that I have obſerved the warm gum plaſters prove moſt uſeful. By ſtimulating the veſſels of the diſeaſed parts they ſeem to excite that kind of effuſion which readily proceeds to a ſtate of purulency.

But the moſt alarming circumſtance to patients with tumours in this indolent ſtate, is, a ſuſpicion which they are apt to entertain that they may ſome time or other end in cancer. This is, however, ſo rare an occurrence, that it ſhould ſcarcely give any cauſe of alarm. The phaga-

denic ſores which occaſionally ſucceed to buboes, and of which we have already taken notice, ſometimes put on a cancerous appearance, but the real ſchirrus which terminates in cancer is rarely if ever the conſequence of a venereal bubo. In different inſtances I have been conſulted for indolent tumours in theſe parts on ſuſpicion of their being cancerous, but I conclude that they are ſeldom or never of this nature, from all of them having done well where the patients have been perſuaded not to meddle with them. They often indeed remain conſiderably enlarged for a great length of time; but when they do not ulcerate no danger is to be dreaded. Wherever parts in this ſituation, however, become cancerous, they ought to be extirpated while they remain in a moveable ſtate.

§ 3. *Of the Cure of Venereal Ulcers.*

In the two preceding ſections we have treated of the cure of chancres, and of thoſe ulcers which ſucceed to buboes, both of which, but particularly the firſt, may be conſidered as primary ſymptoms of the diſeaſe, as they may take place without the ſyſtem being in any degree injured. At preſent we have to conſider the treatment of thoſe ulcers which originate from the ſyphilitic virus having entered the conſtitution, and of which a deſcription has been given in the ſecond ſection of this chapter, page 93.

In the management of theſe ulcers our chief dependence is upon a well-regulated courſe of mercury; and I believe that in general it is the beſt practice to truſt in the firſt inſtance to mercury alone, and not to haſten the healing of the ſores by any other means than the application of mild dreſſings and due attention to cleanlineſs.

Under this treatment we reſt aſſured that the cure is altogether accompliſhed by the deſtruction of the virus, which muſt always be a more doubtful queſtion where cauſtic remedies have been employed.

There are ſome exceptions, however, to this, and I conſider it as of much importance in practice that they be kept in view. Venereal ſores may be ſo ſituated, and in ſuch a ſtate that their farther progreſs may be attended with the loſs of parts materially neceſſary for life, or for the future comfort of the patient, as is the caſe with ulcers that have already penetrated deep in the throat, mouth, noſe, lips, or face. In all theſe ſituations, particularly in the throat, noſe, and lips, they uſually proceed with more rapidity than in other parts of the body, ſo that by truſting to the internal uſe of mercury alone ſuch a deſtruction of parts often takes place as proves afterwards highly diſtreſsful. On this account the cure ought to be haſtened as much as poſſible by the uſe of ſuch dreſſings as we find from experience prove

moſt

most effectual, and no harm can ensue from this being conjoined with whatever quantity of mercury may be required.

In all sores truly venereal, wherever they may be situated, the parts are most speedily brought to a healing condition by a free application of caustic, but the practice has seldom, I believe, been considered as applicable to ulcers in the mouth, throat, or internal parts of the nose. For many years past, however, I have been in the practice of using caustic as well as other escharrotics in the cure of these ulcers with the greatest freedom. No danger has ever ensued from it; and in various instances it has contributed to save the uvula and other parts of the throat, which otherwise were in great danger of being destroyed. Caustic fixed in a tube six or seven inches in length may be easily conveyed to any part of the mouth or throat, and the tube answers the purpose whether it be curved or straight. Caustic excites less pain in these parts than it usually does in other parts of the body,

and it ſeldom fails to remove the irritation which accompanies theſe ulcers, and in this manner to diſpoſe them to heal. One application ſeldom proves ſufficient. Till the mercury has completely entered the ſyſtem, it requires to be repeated once and again, perhaps every ſecond or third day, and in the intermediate days I cauſe the parts to be touched occaſionally either with a weak ſolution of corroſive ſublimate or with a ſtrong impregnation of honey with mercury, which in all ſores of this deſcription is a very uſeful application *.

In the deſcription which I have given of the venereal ſore throat, page 60 of this volume, I have endeavoured to point out marks of diſtinction between it and affections of the throat, the conſequences of other cauſes, and particularly thoſe by which it may be diſtinguiſhed from ulcerations of the mouth and throat which mercury is apt to induce. Among other means of diſtinction may be mentioned the different

* Vide Appendix, No. 5.

effects

effects produced upon them by caustic. In the true venereal ulcer, after the first irritation which it excites is over, a good deal of relief is obtained from it, and the parts soon assume a clean healing appearance; whereas, in sores induced by mercury the application of caustic not only gives very intense pain at first, but this is apt to continue for a considerable time, while the sores retain nearly the same appearances, however frequently the remedy may be repeated.

In the nose and outer parts of the lips, these ulcers, besides being touched with caustic, may be dressed with ointments impregnated with calomel, red precipitate, and even with verdigris; but these remedies are inadmissible to the throat and inside of the mouth from the danger that would ensue from their passing into the stomach.

Even in venereal ulcers of other parts of the body we are often obliged at last to employ remedies of this class. For the most part they become clean soon after

mercury is taken in ſufficient quantity for rendering the mouth ſore, and they frequently heal, merely by continuing the courſe of mercury for a ſufficient length of time. But this does not always happen; for although the ſores may become clean, and even contract, they are very apt to become ſtationary at laſt, and do not ſhow any diſpoſition to heal, however long the mercury may be continued. When we perceive this to be the caſe, the mild dreſſings which we employed at firſt ſhould be laid aſide. The parts ſhould be completely touched with lunar cauſtic every ſecond or third day, and at other times dreſſed with calomel, or red precipitate ointment. In ſome caſes we ſucceed by bathing with a weak ſolution of corroſive ſublimate, or verdigris; but the ointments for the moſt part prove more effectual.

By thus connecting a regular attention to the external management of the ſores, with a due perſeverance in the uſe of mercury,

cury, we very commonly prove ſucceſsful at laſt; but even this does not always anſwer. In ſome inſtances, the ulcers inſtead of becoming clean and putting on a healing appearance, remain foul and equally extenſive as at firſt.

In ſuch circumſtances we ſometimes ſucceed by changing the preparation of mercury, and in others by making ſome variety in the dreſſings applied to the ſores. We ſhould not, therefore, reſt ſatisfied with one mode of treatment, but where no advantage is obtained from the ſecond or third variation of the remedies, particularly if the cauſtic has been ſufficiently powerful, and the mouth kept for a due length of time completely ſore with the mercury, we may in that caſe be aſſured either that ſome other diſeaſe prevails in the ſyſtem or that the ſores are rendered obſtinate by an affection of the contiguous parts.

Scrophula and ſcurvy are the diſeaſes of the conſtitution by which the cure of theſe ſores is moſt apt to be obſtructed.

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Venereal ulcers will no doubt heal in ſcrophulous conſtitutions. Of this we have daily inſtances; but it is equally certain that the contrary often happens, and with ſuch certainty does ſcurvy obſtruct the operation of mercury that a cure can ſcarcely be obtained as we have already obſerved, of any of the more inveterate ſymptoms of ſyphilis while the ſcorbutic diatheſis exiſts in any conſiderable degree. Where either of theſe diſeaſes is therefore found to be the cauſe of our failure, thoſe remedies muſt be employed which prove moſt ſucceſsful in removing them; but having already in different parts of this work had occaſion to ſpeak particularly upon this ſubject, it will not here be neceſſary to conſider it farther.

The local affection which occurs as the moſt frequent impediment to the cure of theſe ſores, is a diſeaſed ſtate of the bones above which they are ſeated, or of the membranes covering theſe bones. In either of theſe caſes, although the virus of the diſeaſe may be eradicated by a courſe

of

of mercury, ſtill the ſores will continue foul, nor will they ſhow any tendency to heal, however long the mercury may be continued. Ulcers of this deſcription being frequently connected with this diſeaſed ſtate of the parts beneath are often the cauſe of more mercury being employed than would otherwiſe be judged neceſſary, for we are too apt to ſuppoſe that all ſuch ſores as were at firſt produced by Lues Venerea are to be cured by mercury alone; an error that has been the cauſe of much mercury being very unneceſſarily given.

Whether the bone, or only the perioſteum be at firſt affected, our practice muſt be nearly the ſame; for in ſuch circumſtances, where the perioſteum is ſo much diſeaſed as to reſiſt the effects of a full courſe of mercury, there muſt ultimately be a partial exfoliation of the bone beneath, before a permanent cure will take place. The ſoft unhealthy granulations with which ſores in this ſtate are apt to be covered muſt be deſtroyed with proper eſcharrotics, and the exfoliation of the

bone

bone muſt be promoted by all ſuch means as uſually prove moſt effectual for that purpoſe, and for which books on ſurgery may be conſulted. I may here ſhortly obſerve, that the beſt eſcharrotic I have employed for the deſtruction of theſe fungous excreſcences which ſprout upon the ſurface of diſeaſed bones is a combination of red precipitate and calcined allum, which proves much more powerful than either of theſe articles when uſed ſeparately, and more effectual even than cauſtic in the uſual way of applying it *.

On the diſeaſed parts of the bone being removed a cure will ſoon take place if a ſufficient quantity of mercury has been given; otherwiſe the ſore will aſſume the uſual appearances of a venereal ulcer, and will not heal till another courſe of mercury is adviſed.

With reſpect to the quantity of mercury to be given for the cure of venereal ulcers,

* A preſcription is given for this article No. 44. Appendix to Vol. I.

this

this muſt at all times be regulated by the effects which reſult from it, and theſe again will in a great meaſure depend upon the duration of the diſeaſe. When the diſeaſe has been of ſhort continuance, and the ſores heal eaſily without the aſſiſtance of external applications, the mercury, if given in full quantity, need never be continued above three weeks after they are cicatriſed; but we ſhould proceed with it for the ſpace of a month where the ſyſtem has either been long infected, or where we have judged it neceſſary to heal the ſores quickly by the application of cauſtic or eſcharrotics. Thus, in an ulcer in the throat, which we might ſuppoſe would require the patient to be under mercury for the ſpace of a fortnight, merely in order to cicatriſe it, and for another fortnight, that is, for the ſpace of a month in all, in order to render his conſtitution ſafe, if by the application of cauſtic the ulcer ſhall be cicatriſed in a week, the mercury ſhould be perſiſted in for a month thereafter, or for five weeks in all.

By

By ſome it has been doubted whether it is neceſſary to perſevere in the uſe of mercury after the ſymptoms for which it is given are removed; but theſe doubts have only been ſuggeſted by thoſe, who, from want of ſufficient experience are not capable of judging, or by others who in the ſupport of a theory which they have adopted, allow their judgments to be ſo far perverted that they loſe ſight of every fact and argument that militates againſt it. There is nothing more certain than that venereal ulcers, as well as every other ſymptom of the diſeaſe, may be compleatly removed by mercury, and yet that the diſeaſe will return in the ſame or ſome other form, if we do not perſiſt in the uſe of mercury for ſome time thereafter; that is, the diſeaſe itſelf may be cured while the diſpoſition remains. All the ſymptoms may be carried off entirely, and yet the virus ſubſiſt in ſuch force that they will at ſome future period break out again. The length of time to which the uſe of mercury ſhould be protracted for removing

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this difpofition it is not always eafy to afcertain. In this and fome of the preceding fections I have mentioned the refult of my own experience upon this point, but this can only be done in general terms, and the quantity of mercury to be given in any particular cafe muft in a great meafure be regulated by the judgment of the practitioner in attendance.

Towards the clofe of a mercurial courfe employed for the cure of venereal ulcers of long duration, decoctions of farfaparilla, mezereon, and guaicum are fometimes given with advantage. The latter I have already mentioned as the moft effectual of thefe, but in fome inftances a combination of the whole has appeared to prove more powerful than any one of them ufed feparately. Many alledge that no advantage is derived from any of thefe; but although I was once of this opinion I am now perfectly convinced that ulcers of this defcription frequently heal more eafily when a mercurial courfe is conjoined with a decoction fuch as I have mentioned, than

when

when the mercury is given entirely by itſelf.

In theſe ulcers, when much irritation prevails, opium proves particularly uſeful. I have in various inſtances, indeed, found that all other remedies are of no avail till this irritability of the parts is removed. In ſome caſes this may be done with hyocyamus. Three or four grains of the extract given at bed time very commonly acts as an anodyne, and I conclude that cicuta, when it proves uſeful here, acts alſo in this manner; but when the irritation is conſiderable opium is the only remedy upon which we can depend. It ought therefore in all caſes to be given where the ſores do not ſoon become perfectly eaſy on the mercury taking full effect, and which they commonly do when they are altogether venereal.

§ 4. *Of the Cure of Venereal Blotches.*

A DESCRIPTION of this ſymptom is given in Section II. of this Chapter, p. 84.

Almoſt the only remedy employed for the cure of venereal blotches is mercury, and when the courſe is well conducted it ſeldom fails. We never find it neceſſary to have recourſe to external applications unleſs the eruptions become hot and uneaſy, in which caſe relief is ſometimes obtained from duſting the parts with flower or ſtarch powder, as is done in caſes of eryſipelas.

Where the uſual method of exhibiting mercury has failed in the cure of theſe eruptions corroſive ſublimate has appeared to prove uſeful; but as the medicine in this form cannot be given in large quantities, it requires to be continued for a great length of time. It ſhould be regularly given for at leaſt ſix weeks after the blotches have diſappeared; and it ſeems to

operate with moſt certainty when conjoined with the decoction which I have juſt had occaſion to mention. The Liſbon diet-drink is ſaid to have proved particularly uſeful in the cure of this ſymptom *. Antimonials, from their well known property of exciting a determination to the ſkin, are frequently combined with mercury in the cure of venereal blotches. Upon this principle I conceive to be formed many of the quack remedies generally employed in cutaneous affections; and it is for the cure of this ſymptom of ſyphilis that Plummer's pill has been moſt frequently uſed †.

Crude antimony is, in caſes of this kind, a favourite medicine with ſome practitioners, and when conjoined with mercury I think I have obſerved it prove uſeful. It may be given either in powder or pills, to the extent of fifteen or twenty grains three times a day; and beſides

* Vide Appendix, Vol. I. No. 4.

† Vide Appendix, Vol. II. No. 21.

being

being given along with the mercury, it may be continued with advantage for two or three weeks after the mercurial courſe is over.

§ 5. *Of the Cure of Nodes, Swellings of the Perioſteum,* &c.

A deſcription of theſe ſwellings has already been given in Section II. page 108; and it is of importance in the method of cure to diſtinguiſh them accurately.

In all the affections to which the perioſteum and bones are liable from the ſyphilitic virus, mercury ought to be given immediately, for it is upon this remedy that we chiefly depend. Where the bones are much ſwelled, that is, where tumours truly oſſeous have arrived at any great bulk, mercury alone will not prove ſufficient; for although it may deſtroy the conſtitutional infection, theſe tumours will remain, but when given immediately upon their firſt appearance, it will prevent their farther increaſe; and as they are always ſmall at

firſt, although they may never diſappear entirely no inconvenience will be experienced from their remaining in this ſtate, even during the life of the patient.

The method of throwing mercury into the ſyſtem by unction is the beſt adapted for this ſymptom, as it is perhaps with a very few exceptions for the cure of every ſymptom of the diſeaſe; but it does not appear that any advantage is derived from rubbing the ointment upon the tumours. On the contrary, by tending to irritate and fret the ſkin, it renders them more painful, ſo that it anſwers better to apply it to other parts.

As the bones ſeldom become affected till the diſeaſe has been of long duration, it is perhaps for this reaſon that more mercury is in general required for the cure of this ſymptom than for any other ſyphilitic affection. I believe, however, that we are often deceived in this, and continue to give mercury for the cure of the local affection long after the virus by which

which it was produced is eradicated, and for which purpofe alone it was prefcribed. Next to the ftate of the fyftem, which we render fafe by a due continuation of the mercurial courfe, the pain excited by the tumour is the fymptom which chiefly requires attention. When the mercury is employed immediately upon the fwelling taking place the pain commonly fubfides foon; but if the tumour has previoufly arrived at any confiderable bulk, the pain which it excites is apt to be fevere, while it is not allayed or even leffened by all the mercury we can employ. Where the fkin has become inflamed and painful, fome relief will be obtained from faturnine applications; but as the pain depends chiefly on the ftretching of the periofteum by the tumour of the bone, whenever it becomes fevere nothing will prove effectual but the divifion of this membrane. No practitioner would lay a bone bare for a moderate degree of pain, whatever the caufe of it might be; but whenever the pain produced by nodes becomes

diſtreſsful, and is not allayed by a courſe of mercury, as I know of no other remedy that will give relief, I conclude that we are fully juſtified in adviſing an inciſion to be made completely through the perioſteum, along the whole courſe of the tumour.

Where the bone is not much increaſed in bulk, and not otherwiſe diſeaſed, if a ſufficient quantity of mercury has been given for the deſtruction of the virus, a cure may be obtained without any part of it exfoliating. With which view the mildeſt dreſſings only ſhould be employed, while the ſore is protected as effectually as poſſible from acceſs to the air. But, when the tumour of the bone is conſiderable, and particularly when caries has taken place, as it would be vain to expect a cure but with the exfoliation of the diſeaſed parts of the bone, ſo all ſuch means ſhould be employed for effecting this as are known to be moſt powerful. Any of the ſoft parts covering the diſeaſed part of the bone ſhould be removed with eſcharotics,

rotics. Small holes ſhould be drilled through the carious part of the bone, and the ſore ſhould be dreſſed with precipitate or verdigris ointments, of ſuch a ſtrength as to act gently as ſtimulants upon the contiguous parts. By due perſeverance in this mode of treatment, and taking care at the ſame time to ſupport the ſtrength of the patient with a nouriſhing diet, the diſeaſed parts of the bone will at laſt exfoliate, when the healing of the ſore not being impeded by any other cauſe, a cure will ſoon be obtained with common treatment.

The next variety of tumour taken notice of in the deſcription which I have given of nodes, proceeds, as we have had occaſion to ſee, from the effuſion of a thin fluid between the perioſteum and ſurface of the bone. This alſo is apt to be accompanied with ſevere pain; but as the pain is induced by the diſtenſion of the perioſteum, in conſequence of a fluid being collected beneath, and as this fluid is frequently abſorbed on the mercury tak-

ing effect, we ſeldom find it neceſſary to lay this variety of tumour open. Abſorption of the matter is ſometimes promoted by the application of a bliſter to the part, or by rubbing it occaſionally with ſtimulants, ſuch as volatile liniment or tincture of cantharides. But when the ſwelling has been of long duration, as the ſurface of the bone is in this caſe commonly injured, as the abſorption of the matter does not take place ſo readily, and as the tumour at the end of the mercurial courſe is commonly larger than before, an inciſion the whole length of the tumour ſhould be made through the perioſteum, and the wound dreſſed in the manner juſt now adviſed. I think it right, however, to obſerve, that the opening of theſe tumours is very ſeldom neceſſary; and that it would in no inſtance perhaps be ſo if mercury was given in ſufficient quantity ſoon after their formation. Even where the quantity of effuſed fluid is conſiderable, the ſwelling for the moſt part begins to leſſen ſoon after the mercury has fully en-

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tered the fyftem; and if the effect of the medicine is kept up for a fufficient length of time we feldom fail in removing it entirely.

In thofe diffufed fwellings upon the bones which I have taken notice of in the defcription as a fymptom of fyphilis, and which alfo have improperly been termed nodes, mercury, when properly given, feldom fails to effect a cure; but it requires to be given in as large quantities as the patient can bear, and to be continued for a confiderable time, commonly for nine or ten weeks. The pain indeed foon fubfides upon the mercury taking full effect; but when the fwelling has been of long continuance, as often happens before mercury is given, from the difeafe being at firft apt to be miftaken for rheumatifm, in order to remove it the mercury muft be employed for feveral weeks after the pain has ceafed. In the treatment of this fymptom blifters prove particularly ufeful, and they fhould be

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applied along the whole courſe of the ſwelling.

Where the ligaments, tendons, and faſciæ of muſcles, become ſwelled, as ſometimes happens from the matter of venereal ulcers ſpreading to thoſe parts from the ſkin and cellular ſubſtance where they originate, we depend entirely upon a courſe of mercury, with proper attention to the external treatment of the ulcers in the manner we have already pointed out.

§ 6. *Of the Cure of Venereal Excreſcences about the Anus.*

In ſection ſecond of this chapter, page 123, a very particular deſcription has been given of theſe excreſcences.

A full mercurial courſe is the remedy for theſe excreſcences; under which they gradually leſſen, and at laſt very commonly diſappear altogether; but where we are diſappointed in this, we muſt uſe the ſame applications recommended for the

the removal of the warty excrefcences which fucceed to Gonorrhœa *.

The difeafe being now entirely local, no advantage can accrue from mercury being longer continued, while we feldom fail with a proper application of efcharrotics.

Where the furface of thefe excrefcences becomes ulcerated, and yields matter, faturnine lotions and other aftringents fhould be employed to heal them; for as the matter which they afford appears to be venereal, and of which we judge from the real venereal bubo being in women fometimes produced by it, the longer that this fecretion is allowed to continue the more of it will pafs into the fyftem, and the greater the rifk will therefore be of fome of the glands in its courfe towards the heart being obftructed.

* Vide Chapter III. Section XIII. Vol. I.

§ 7. *Of*

§ 7. *Of the Cure of the Venereal Swelled Testicle.*

For the description of this affection of the testicle, and of the difference between it and other tumours to which the testis is liable, I must refer to section second of this chapter.

One important difference between this tumefaction of the testicle and that which proceeds from Gonorrhœa is, that in the latter mercury very frequently does harm, while in this it is the remedy upon which we chiefly place dependence. Unless the swelling has been allowed to advance to a great size, from an opinion which some have entertained that it is always of a local nature, and not connected with diseases of the constitution, mercury seldom fails to cure it. Were it not to add considerably to the extent of the present work, this, as well as many other points, of which I have had occasion to take particular notice,

tice, might be illuftrated and proved by a variety of cafes which have fallen under my obfervation, in which the fwelling of the teftis to which I allude, produced altogether by the fyphilitic virus in the fyftem, and in many inftances where Gonorrhœa never exifted, after refifting every other remedy, has at laft been completely cured by mercury. Befides other views of no fmall importance in the theory of the difeafe, which this tends to eftablifh, it may be looked upon as an additional argument for confidering the matter of Gonorrhœa and of pox as different. The fwelling of the teftis which occurs in Gonorrhœa yields entirely to the effects of an antiphlogiftic courfe, and without doing any injury to the conftitution, while the other in no inftance has been known to do fo, and gives way only to that remedy which we know by experience is alone to be trufted for the cure of every other fymptom of fyphilis.

Mercury even proves effectual in removing thofe tumours in which matter has formed.

formed. I have met with ſeveral caſes in which a partial ſuppuration had taken place in the body of the teſtis before mercury was given, and the matter has been abſorbed, and the ſwelling entirely removed ſoon after a ſufficient quantity of the medicine has been thrown in. In ſome I have thought that mercury was aſſiſted by a decoction of mezereon being given along with it; but it is for the moſt part abundantly ſucceſsful by itſelf.

Where the uſe of mercury has been too long delayed the ſwelling commonly ſuppurates, and the ſore which enſues from the burſting of the tumour aſſumes always a very ugly appearance. Even in this ſituation, however, our chief advantage is derived from mercury; nor do we often fail in curing the ſore if due attention is given to regular dreſſings, and procuring a free diſcharge to the matter. The beſt dreſſings for this purpoſe are the ſaturnine and zinc ointments when the parts are clean, and the precipitate or verdigris

gris ointments when they are foul or ſloughy.

But where matter is obſerved to lodge in any part of the ſwelling, nothing can be of advantage but making a free opening into it. This, however, is not always done ſo completely as it ought to be. The teſtes being organs of much delicacy, we are apt to be afraid of opening any abſceſſes that may form in them, in conſequence of which the matter is apt to find acceſs into the cellular ſubſtance of the ſcrotum, where it ſeldom fails to produce very troubleſome ſinuſes. This, however, may always be prevented, either by making a free inciſion into the moſt depending part of the abſceſs, without allowing it to burſt, or taking care to enlarge the opening if it has previouſly made way for itſelf. Nor ſhould we ever be afraid of doing ſo, for the injury which this may do to the teſticle cannot be equal to what it muſt ſuffer from matter being allowed to lodge in it. In all ſuch circumſtances I never heſitate to lay the teſticle free-

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ly open, and no inconvenience ever enſues from it.

As this affection of the teſticle never occurs but in very advanced ſtages of ſyphilis, it requires a very conſiderable quantity of mercury to remove it, and at the ſame time to eradicate the virus from the ſyſtem by which it has been produced. It ought to be continued from ten to twelve weeks, and in as great quantities as the patient can bear.

When the ſores which enſue from the burſting or opening of theſe tumours do not heal after ſuch a quantity of mercury is exhibited as we judge to be proper for the ſafety of the conſtitution, ſome advantage is occaſionally derived from a plentiful uſe of hemlock, and from ſea-bathing; but in ſuch circumſtances nothing proves for the moſt part ſo uſeful as dreſſing the parts in the manner I have mentioned, with ſtimulating ointments, and touching them occaſionally with cauſtic. This we are alſo apt to be afraid of from the natural irritability of theſe parts; but I have

have not found that there is cause for this. On the contrary, a free application of caustic to the surface of these sores renders them for the most part less painful. Where much irritation however prevails, and is not removed or much lessened by the use of caustic, opiates must be given in such quantities as are sufficient to allay it.

Of the Treatment of Alopecia, Venereal Blindness, and Deafness.

A description of these symptoms was given in Section II. of this chapter, § 11. 12. and 13.

When alopecia, or the falling off of the hair takes place in any considerable degree before mercury is employed, particularly if the patient is advanced in years, it never grows again but in very small quantities; but during youth, and when mercury is given in the commencement of this symptom, we not only prevent it

from advancing farther, but any hair that has been loſt will very commonly be renewed. There is ſcarcely indeed any other remedy upon which we can depend but a full courſe of mercury; for although many external applications are recommended to recover or renew hair loſt in this manner, there is no reaſon to ſuppoſe that any advantage is derived from them.

Where the falling away of the hair is connected with a ſcurf over the head, ſome benefit indeed is obtained from the application of external remedies; by removing the eruption we tend to prevent any farther loſs of hair, and the internal uſe of mercury alone is not altogether ſufficient for this. The moſt effectual applications for the removal of this are the unguentum citrinum *, and a weak ſolution of corroſive ſublimate in water. When the former is uſed the parts ſhould be rubbed with it once a-day. The latter may be applied three or four times daily, in the proportion of

* Vide Appendix, No. 14.

half

half a grain of the mercury to an ounce of water; and for the more effectual application of these remedies, the head should be shaved, and the hair not allowed to grow till the eruption or scurf is entirely removed.

In the treatment of blindness as a symptom of Lues Venerea we have scarcely any variety of practice. Mercury is perhaps the only remedy from which any advantage is to be expected; nor does it prove of any avail if it be not given immediately, and in as great quantities as the patient can bear. Whether the eye is therefore affected with gutta serena, cataract, or effusions upon the cornea, where there is the least reason to suppose that the affection proceeds from Lues Venerea, the patient should be immediately put under a complete course of mercury, and his mouth kept fully affected for the space of ten, eleven, or twelve weeks, according to the effects which arise from it.

In gutta serena it may be proper before mercury is given to premise a smart pur-

gative or two, and during the courſe to conjoin the repeated application of bliſters to the temples and head, with electricity, and errhines for the purpoſe of exciting a diſcharge by the noſe, although the effects of theſe remedies are ſo uncertain that in every inſtance our chief dependence muſt reſt upon mercury.

Where the blindneſs is found to proceed from cataracts, if mercury does not ſucceed in removing the opacity, our only remedy muſt be the uſual operation of depreſſing or extracting the chryſtallines. This will not always ſucceed, but where the eye is otherwiſe ſound, and only the local affection of the lens appearing to be the cauſe of blindneſs, we ought in every inſtance to adviſe it.

We ſometimes find that mercury here proves ſo far uſeful as to leſſen the opacity of the lens in a conſiderable degree, without removing it entirely; and where this has happened I have found in more inſtances than one that a cure has been accompliſhed by electricity. I have never per-

perceived, however, that electricity has produced any advantage where the opacity was not previously much diminished, and even in this situation it requires to be long continued in order to prove effectual.

In blindness produced by the humours of the eye becoming confused or turbid, where it is known that this proceeds from the system being affected with syphilis, the patient ought no doubt to be put under mercury; but this cause of blindness is of a very hopeless nature, for I have never known an instance of its being removed. Neither do we prove very successful even with mercury, where vision is affected by the matter of syphilis fixing upon the coats of the eye. We may prevent the disease from advancing much farther, but mercury does not appear to be sufficient for removing any considerable degree of opacity in the cornea that has already taken place. Nor does this cause of blindness admit of remedy by means of a surgical operation; for it is

not upon the ſurface, but in the very ſubſtance of the cornea that it is ſeated.

When abſceſſes form in the coats of the eye, we have it in our power by diſcharging the matter which they contain to remove in ſome degree the deformity which they produce, as well as the pain with which they are accompanied; but we are not to look for any farther advantage from this or any other remedy that can be propoſed.

Of all the ſymptoms of Lues Venerea, none prove more obſtinate, nor are leſs acted upon by mercury than deafneſs. A certain degree of deafneſs, indeed, produced by venereal ulceration or ſwelling at the opening of the Euſtachian tube in the throat is ſometimes relieved or even removed by a courſe of mercury; but no advantage is ever obtained from this or any other remedy where the diſeaſe has fixed upon the membrane or bones of the ear. In the deſcription of this ſymptom, I had occaſion to remark, that a tempo-

temporary deafnefs is fometimes produced in Lues Venerea by the meatus externus being filled up by a fcurfy eruption; and in fome inftances, by the membrane of the paffage becoming thickened and even ulcerated. In this, as in other fymptoms of the difeafe, we depend entirely on the internal ufe of mercury for removing the virus from the conftitution; but the local affection may remain after the fyftem is rendered fafe. The beft remedy I have employed for this is a cautious ufe of bougies. Care, however, muft be taken that they be not pufhed fo deep into the paffage as to injure the tympanum; and they ought to be formed of the mildeft materials, as they never fail to do harm when they excite much irritation.

§ 9. *Of the Cure of ſome Anomalous Symptoms of Lues Venerea.*

In ſection ſecond of this chapter, page 145, ſundry anomalous ſymptoms of ſyphilis are enumerated which could not with propriety be deſcribed in any of the preceding ſections.

For the cure of theſe we depend almoſt entirely upon a full courſe of mercury. Scarcely any of them occur but in the later ſtages of the diſeaſe, and they are very apt to recur, if the medicine be not given in as large quantities as the patient can bear and continued for a conſiderable time after they have diſappeared. Beſides this general courſe of treatment, ſome of theſe ſymptoms require a peculiarity of local management.

The firſt that I have mentioned are theſe chops or clefts in the palms of the hands and ſoles of the feet to which ſyphilitic patients are ſometimes liable. The beſt

beſt dreſſings that I have employed for theſe are the unguentum citrinum *, and unguentum e mercurio precipit. Rubr. †. But while theſe ointments are perhaps the beſt that can be applied to the chops themſelves, they are too irritating to admit of being applied to the contiguous parts, which for the moſt part are red and tender, and which are beſt defended by the unguentum ſaturninum ‡.

For the removal of that ſcurf and gummy matter which occaſionally forms and becomes very troubleſome upon the eyelids of ſyphilitic patients, I have found nothing anſwer ſo well as bathing them from time to time with a weak ſolution of white vitriol, and applying over the eye-laſhes and cartilaginous border of the eye-lids a ſmall portion of the calamine liniment §, or unguentum citrinum, ſo much reduced with axunge as to pre-

* Vide Appendix. No. 14.
† No. 27.
‡. No. 29.
§ No. 31.

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vent it from exciting too much irritation.

The fores which fucceed to the fwellings defcribed in p. 146, are frequently healed by mercury alone, but in fome inftances they refift even this and all the dreffings we can employ. Cauftic and other efcharrotics prove to be the beft applications here, as we find them indeed to be in almoft every variety of venereal ulcer. When they do not fucceed it is for the moft part owing to a greater degree of irritation and pain in the fore than is confiftent with the procefs of healing. In this cafe nothing proves fo effectual as fufficient dofes of opiates.

When the pains mentioned in p. 149 do not give way to that quantity of mercury which we judge to be fufficient for the fafety of the conftitution, we fometimes find that they may be removed by blifters applied directly to the parts affected, and anointing them with æther, anodyne balfam, or volatile liniment.

For the removal of thefe pains we are often obliged to have recourfe to opium.

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In ſufficient doſes it ſeldom fails by itſelf, but it proves more effectual in every variety of pain when given in the form of Dover's powder. Ten or twelve grains of the powder given at bed-time, and continued for ſeven or eight nights ſucceſſively, very commonly affords effectual relief.

The irritability, reſtleſſneſs, and atrophy to which venereal patients are not unfrequently liable, are often difficult to remove, and ſometimes even prove fatal. I have known different inſtances of theſe ſymptoms proving incurable where ulcers and other ſymptoms of the diſeaſe with which they were at firſt connected were eaſily removed, but where the patient by conſtant reſtleſſneſs and anxiety, having firſt been deprived of his appetite, and afterwards of ſtrength, was at laſt carried off, notwithſtanding all the means that could be employed for his ſafety.

I judge that theſe ſymptoms are in many inſtances altogether venereal, from obſerving them accompanying other well-

marked

marked ſymptoms of the diſeaſe, and from mercury being the only remedy that has any influence in removing them. Even mercury will not always ſucceed; but in various inſtances I have known it prove effectual where every other remedy had previouſly been tried in vain. Peruvian bark, a change of diet, and country air, are commonly preſcribed; but we may readily conclude that no material advantage can reſult from them if the mercurial courſe be not alſo continued till the virus is eradicated.

This reſtleſs anxiety to which ſyphilitic patients are occaſionally liable, is in ſome inſtances very effectually removed by opiates, while in others theſe remedies rather do harm. The only courſe that I have found to prove uſeful, is, a light, nouriſhing diet, a due continuance of mercury, and the patient, during the time of uſing it, being allowed to go daily abroad in a carriage when the weather is not cold or damp.

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In the uſe of mercury for the cure of this ſymptom the greateſt nicety and care are required; for in the delicacy of conſtitution which prevails here it conſtantly does harm, if not managed with much attention. It cannot be given in large doſes but with much riſk of doing harm; nor can it be laid altogether aſide without the diſeaſe gaining ground. If ever an alterative courſe of mercury, as it is termed, is proper for any of the ſymptoms in the more advanced ſtages of ſyphilis, it is here. By a regular exhibition of ſmall doſes of mercury the virus may be kept moderate till the ſtrength of the ſyſtem is ſo far reſtored by attention to regimen as to admit of larger quantities being given.

The moſt frequent analomous ſymptom in this diſeaſe is fever. It is often the effect of ſome evident ſymptom, ſuch as bubo, ulcer, or node. In ſuch caſes the cauſe is obvious, and the fever diſappears along with the ſymptom by which it was induced. But where a quantity of mercury ſufficient for eradicating the diſeaſe has

has not been given, although all the ſymptoms for which it was employed may be removed, yet fever will ſometimes take place, and in ſome inſtances ſubſiſt for a conſiderable length of time before any external mark of the diſeaſe is perceived. This I know is doubted, and even denied by many; but I have met with it frequently, and in ſome inſtances diſtinguiſhed in the moſt obvious manner. In ſome, where from the hiſtory of the caſe the cauſe was evident, the patient has been cured by an additional courſe of mercury; while in others, from no cauſe of ſuſpicion being mentioned, the febrile ſymptoms reſiſted all the uſual remedies, and were not removed at laſt till the appearance of nodes, ulcers, or ſome other local ſymptom has pointed out the neceſſity of a farther proſecution of mercury.

The effect of mercury upon this fever is often remarkable. In almoſt every other ſituation it is one of the firſt effects of mercury in a certain degree to accelerate the circulation of the blood, while

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here it not only leſſens the quickneſs of pulſe, but abates every other febrile ſymptom. Even in ſmall quantities mercury proves uſeful here, as it evidently does in the ſymptom laſt mentioned; and as the ſtrength of the patient is commonly much exhauſted before this remedy is employed, it ſhould not at firſt be given in larger quantities than is merely neceſſary for mitigating the ſymptoms. This, however, not being ſufficient to render the conſtitution ſafe againſt future returns of the diſeaſe, care ſhould be taken that a ſufficient quantity of the medicine is exhibited as ſoon as the patient's ſtrength, reſtored by a nouriſhing diet, enables him to bear it.

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SECTION VI.

Of Lues Venerea in Infants.

NO period of life is exempted from the ravages of the venereal difeafe. They are frequently to be deplored even in infancy, and here the fame fymptoms appear as in a patient of more advanced years; that is, when the virus enters the fyftem in the ufual way from the furface of the body, the fymptoms which enfue are nearly or entirely the fame as in other periods of life: but when the diforder is communicated to the fœtus in utero, fome variety is obferved, which demand particular notice.

We have already indeed had occafion to remark, that it has been doubted whether Lues Venerea can be communicated to the fœtus in utero. Nay, of late it has even

even been aſſerted that it cannot, and that practitioners upon this very important point have hitherto been miſtaken. But this is ſo contrary to general experience, and to the reſult of my own obſervation, that I cannot conſider it as an opinion that will ever gain ground where the judgment is not entirely warped. A deſire to ſupport a particular theory ſeems to have laid the foundation of this doctrine; but the facts which militate againſt it are too ſtrong and too numerous to admit of being eaſily ſet aſide *.

Thoſe who are of opinion that neither the blood nor any of the ſecretions of a ſyphilitic patient can communicate the contagion, alledge, that when a child appears to have been infected in utero, the

* Even Mr. Hunter has unguardedly fallen into this error; and as his authority would neceſſarily have influence with thoſe whoſe opportunities for obſervation are not ſo great, I think it right, in a matter of ſuch practical importance, to endeavour to render the miſtake obvious. See different parts of Mr. Hunter's Treatiſe.

infection muſt have been communicated during labour from venereal ſores in the genitals of the mother.

That this in ſome inſtances happens there is no reaſon to doubt. A child paſſing over, and perhaps reſting for a conſiderable time upon ſores of this kind, may readily be infected in this manner, and this may probably be the caſe in moſt of thoſe inſtances where the diſeaſe does not appear till two or three weeks after birth. But where a child is inſtantly upon delivery found to be covered with a venereal eruption, and which I have met with in various inſtances, the infection muſt neceſſarily have been communicated a conſiderable time before birth. It may be aſked, however, in what manner eruptions appearing on the birth of a child have been known to be venereal? In anſwer I may obſerve, that it has been aſcertained in the moſt obvious manner, by finding on enquiry that the father had been poxed without taking ſuch a quantity of mercury as was neceſſary to eradicate the vi-

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rus; by the eruption upon the child being exactly ſimilar to what experience in other inſtances ſhews to be venereal; by a child in this ſituation giving the different ſymptoms of Lues Venerea, evidently and ſtrongly marked, to the nurſe by whom it has been ſuckled; by the nurſe giving the diſeaſe in the firſt place to another child, and afterwards to her huſband, and by the diſeaſe in all of them being cured by a proper uſe of mercury alone, while no other remedy is of any avail.

Every practitioner muſt have met with inſtances of this. I have ſeen many, in ſome of which no external mark of the diſeaſe appeared either in the father or mother, although one or other of them, and in ſome caſes both, muſt have been infected. I conclude that we have ſufficient evidence of this where the ſame parents produce one, two, or more pocky children, and continue to do ſo till both paſs through a complete courſe of mercury; and hence, notwithſtanding

any theoretical opinion that may be advanced to the contrary, I have much reason to imagine that the opinion which I have elsewhere given, that the semen of a diseased parent will give a pocky offspring, is well founded. No person, I believe, will doubt of other diseases being communicated in this manner. We have daily proofs of it in gout, pthisis, scrophula, and, perhaps, in some others, in which these diseases descend from fathers to their children, while no infection is communicated to the mother; and I have met with very decisive evidence of it in Lues Venerea, at least with such as leaves no room with me for doubt.

About ten years ago I was desired to visit a child seven or eight days old. It was covered with a rash, which had much the appearance of being venereal; and finding that the only other child which the parents ever had was born with a similar rash, of which it died, I enquired at the father of the child whether there was any cause to suspect that he was infected

or

or not. He informed me that he had been poxed about ſix months before his marriage; that his ſymptoms were chancres and a ſore throat; but that having taken as much mercury as was judged to be ſufficient, the ſymptoms having diſappeared while under the courſe, and none of them having ever occurred again, although he had now been married nearly three years, he could not poſſibly believe that the child was infected with this diſeaſe, particularly as no ſymptom had appeared upon his wife. I was clearly of opinion, however, that the child was infected; and I judged it right to ſay, not only that the child ſhould inſtantly get mercury, but that he and his wife ſhould alſo take it, with a view to prevent the ſame occurrence with any other children which they might have, as well as to render themſelves ſafe. He agreed to this with reſpect to himſelf, but on account of the ſuſpicion which it might create, he would by no means conſent that it ſhould be given to his wife. Imperfect as this meaſure

ſure might be, I was obliged to adopt it. Small doſes of calomel were given to the child, and the father was kept under a complete courſe of mercury, with unction and the blue mercurial pill, for the ſpace of ten weeks. The child got well; and although the ſame parents have had ſeveral other children ſince that period, all of them have been perfectly ſound. Some doubt, however, might ſtill have remained of the real nature of this raſh, but it happened that a very deciſive, although unfortunate proof was given of its being venereal. Two nurſes were infected by the ſuckling of this child. The firſt became ſo much diſtreſſed with ulcers upon her nipples, and pains in one of the mammæ, that ſhe was obliged to leave the family, and although warned of her ſituation, and of the neceſſity of giving no ſuck to other children till the courſe of mercury which ſhe was put under was finiſhed, ſhe fooliſhly took home her own child, which ſhe had previouſly given out, and in the courſe of two or three weeks he alſo was poxed,

and

and being a weakly child, he ſoon died, although the greateſt care was taken of him. The nipples of the other nurſe ulcerated, and ſhe was ſoon thereafter ſeized with a venereal ulcer in the throat, for which a courſe of mercury became neceſſary. Since that period, beſides ſome inſtances in which the diſeaſe was given to children, where there was much reaſon to think that both parents were infected, I have met with other two caſes very ſimilar to that which I have mentioned, in which a mercurial courſe given to the father proved ſo completely ſucceſsful that all the children of both families that have been born ſince that time have been entirely healthy, although one of them had previouſly loſt two and the other one from their not having entertained any ſuſpicion of the nature of the diſeaſe.

Theſe, as well as various other facts which I might adduce, render it obvious to me that Lues Venerea may be, and frequently is, communicated in the manner I have mentioned, that is, by the infec-

tion paſſing directly from parents to children, and where no marks of diſeaſe appear either upon father or mother. Nor would I have judged it neceſſary to have entered ſo fully into the ſubject, as by many the opinion I am endeavouring to eſtabliſh will be admitted, had it not been with a view to put the younger part of the profeſſion upon their guard, till by experience they are enabled to judge for themſelves of the diſtreſsful conſequences that would frequently reſult from the oppoſite doctrine being admitted.

Among other baneful effects of ſyphilis, perhaps none prove more diſtreſsful than the frequent abortions which it evidently occaſions. A child infected in the uterus will in ſome inſtances not come away till the full time; but in a great proportion of caſes abortion takes place in the ſixth or ſeventh month, ſometimes ſooner, but moſt frequently about the middle of the ſeventh month. Of this I have met with ſuch a number of inſtances, that I am induced to conſider it as one

one of the moſt frequent cauſes of abor-tion; but as the child is commonly either born dead, or ſo weakly that it ſoon dies, ſufficient evidence is not often obtained to lead the attendants to entertain any ſuſpicion. Hence practitioners ſeldom hear of it unleſs the diſeaſe has made greater progreſs than uſual. We have it in our power, however, when this cauſe of abortion is diſcovered, to remove it with much certainty. A well-conducted courſe of mercury very ſeldom fails to prove effectual. I have now met with a conſiderable number of inſtances where abortion had regularly taken place in the ſixth, ſeventh, or eighth month, and in which, from there being no mark of diſeaſe either upon the father or mother, the real cauſe of it remained concealed; but which being at laſt diſcovered, either by ſome of the children being clearly marked with the diſeaſe, or from its breaking out in an obvious form on one or both of the parents, a mercurial courſe has at laſt been preſcribed, and in no inſtance has it failed

where

where a ſufficient quantity of the medicine has been given. In two inſtances it did not anſwer ſo completely as in the others, but in both there was ſufficient evidence of too little mercury having been employed; for the children in both inſtances were kept till the beginning of the ninth month, which in the one was two months, and in the other ſix weeks later than had been the caſe before, and both the parents having in each of theſe inſtances been made to take mercury again, and in greater quantities than before, no abortion has ſince taken place, and each family has within theſe few years had ſeveral healthy children.

At whatever period children with this infection are born they are remarkably weak and delicate. The muſcles over the whole body are flaccid, and the joints have not that firmneſs which they ought to poſſeſs. When the diſeaſe is diſcovered immediately upon the birth of the child, it is uſually in the form of an eryſipelatous efflorefcence over the whole

body. In ſome inſtances the cuticle is either altogether or in part deſtroyed, and the ſkin is tender, and affords a kind of matter. In others the nails have not formed either on the fingers or toes.

Sometimes again no mark of diſeaſe will be perceived till the tenth, twelfth, or even fourteenth day after delivery; and in ſuch caſes the eruption occurs chiefly about the anus, on the nates, and about the pudendum. In theſe places irregular blotches ariſe, of a light ſtrawberry colour, and ſomewhat elevated above the contiguous ſurface. Although a thin acrid ſerum in ſome inſtances oozes from them, if not prevented by a timeous exhibition of mercury, the diſeaſe is apt to ſpread quickly over the whole body; but excepting in the parts which I have mentioned, it uſually appears in the form of a cruſty eruption, which in ſome caſes is dry, and falls off in ſmall ſcales, while in others it is kept together by the exſudation of a viſcid matter, particularly upon

on the forehead, eye-lids, arms, and breaſt.

I have already had occaſion to obſerve, that in ſupporting a favourite theory ſome have denied that the fœtus in utero ever receives this diſeaſe from the parents, and aſſert, that wherever it occurs in new-born children they muſt have received it from the mother in the time of delivery. But while the fallacy of this opinion is rendered obvious, as we have juſt had occaſion to obſerve from the fœtus being in many inſtances perceived directly after birth to be covered with a venereal efflo-reſcence, we alſo find that the ſyphilitic virus is in this ſtate of a more dileterious nature than it ever appears to be in any other form of the diſeaſe. Beſides being more particularly apt to communicate the infection, it proceeds with more rapi-dity to deſtroy the conſtitution, inſo-much, that if mercury be not employed immediately on the diſeaſe being perceiv-ed, it uſually makes ſuch quick progreſs that

that a fatal termination can ſcarcely be afterwards prevented.

In all ſuch circumſtances the child ought to be nurſed by the mother; and as mercury is neceſſary for both, they ſhould both be put immediately under it. As it has been found that a diſeaſed child may be cured by ſucking the milk of a woman under mercury, ſome have adviſed that new-born children ſhould always be treated in this manner. But I can ſay from experience that it is not to be truſted. In ſome inſtances this practice will no doubt ſucceed. In all it will perhaps accompliſh a temporary removal of the ſymptoms, but for the moſt part they return again, or the diſeaſe breaks out in ſome other form. At the ſame time, therefore, that the mother begins to take mercury, it ought to be given to the child, and it may be done with no inconveniency; for even at this early period it excites leſs diſtreſs than it uſually does afterwards. The cauſe of this may be difficult to aſſign; but I have in various inſtances found that mercury in

in early infancy, is not ſo apt to excite either ſalivation or violent effects upon the ſtomach and bowels as it afterwards does, and that it may be given with ſafety in ſufficient quantities for curing the diſeaſe. Calomel is often employed for this purpoſe. The doſe ſhould be the fourth or fifth part of a grain three times a-day, and when rubbed with a ſmall quantity of ſugar, the child takes it eaſily. Mercurius alkaliſatus is a preparation that anſwers particularly well in the doſe of half a grain three times a-day; and I ſometimes employ the common blue pill prepared with triturated quickſilver. A pill containing a grain of mercury, being rubbed into a powder, and divided into four, one of theſe is given evening and morning. Any of theſe being continued for the ſpace of a month, will, in moſt inſtances, remove every appearance of the diſeaſe; but a complete cure will not be accompliſhed if the uſe of the medicine is not perſiſted in for a conſiderable time thereafter. When the child is healthy, and

not

not of a delicate form, this ſhould be done with no interruption, otherwiſe it may be laid aſide occaſionally for eight or ten days together; but upon the whole, it ſhould be given for the ſpace of fifteen or ſixteen weeks, and never diſcontinued ſo long at once as to allow the effects of the mercury upon the ſyſtem to be entirely gone at any one time.

When a child in this ſituation cannot be ſuckled by its mother, either from her want of milk or any other cauſe, what are we to do? Another nurſe is commonly procured; but this reſource ought never to be adopted, for it ſeldom fails of giving the diſeaſe in the moſt virulent form to whoever is ſo unfortunate as to be employed for this purpoſe. All ſuch children ought to be nouriſhed and brought up on ſpoon meat, nor ſhould the reſtriction be confined to the firſt weeks of infancy only. No child infected in this manner ſhould be put to the breaſt of a ſound nurſe till a courſe of mercury has been continued for three months at leaſt after every external

mark

mark of the diſeaſe is gone. In one inſtance, where a child in this ſituation had for ſeven weeks been nurſed by the mother, and where mercury had been regularly continued for the ſpace of three weeks after every external mark of the diſeaſe had diſappeared two different nurſes were infected, who were employed to ſuckle the child during a temporary fever with which the mother was attacked. And in another the diſeaſe was given in the ſame manner where the child was three months old, and where every ſymptom of ſyphilis had diſappeared upwards of eight weeks. Hence I conclude that the greateſt attention is required for preventing ſimilar occurrences, and that nothing will prove effectual but a regular and long-continued uſe of mercury.

In addition to what I have already ſaid on the ſubject of ſyphilis producing abortion, I may obſerve, that when a woman has ſuffered one or more abortions, and has reaſon to think that they proceed from venereal

venereal infection, ſhe, as well as her huſband, ſhould immediately be put under mercury. It is a prevailing opinion that mercury is apt to occaſion abortion, and it is therefore ſeldom given during pregnancy. Much experience, however, has convinced me that this opinion is not well founded, and, when managed with caution, that it may be given in ſufficient quantities at every period of pregnancy, for curing every ſymptom of ſyphilis, and without doing the leaſt injury either to the mother or child. We would not indeed from choice give mercury during pregnancy; but when a woman in this ſtate is evidently poxed, or when there is good reaſon to think that ſhe is ſo, I would not heſitate to adviſe a courſe of mercury. In different inſtances I have done ſo, and always with much advantage. Where obvious ſymptoms of Lues Venerea break out during pregnancy ſcarcely any will doubt of the neceſſity of giving mercury, but ſome explanation may be required for adviſing it to be given

where there is only ground for ſuſpicion.

In illuſtration of the propriety of this, the following, among ſeveral caſes, may be recited. Five years ago I viſited a lady in the fourth month of pregnancy, on account of a ſimple fracture of the os humeri. The patient being young and healthy I prognoſticated a ſpeedy cure. She had been married four years, and had ſuffered two abortions, one in the ſixth, the other in the ſeventh month, and her friends were anxious leſt this accident ſhould produce the loſs of another child. This induced me to inquire into the circumſtances attending the previous abortions, when I found that both children were born dead, and entirely deſtitute of nails and cuticle. No obvious ſymptom of ſyphilis had appeared upon the parents, but the huſband had occaſionally been attacked with a dry ſcaly eruption upon the breaſt and ſhoulders. I alſo diſcovered that he laboured under the venereal diſeaſe a few months before marriage; and it did not appear to me that

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he had taken mercury either with the regularity or to the extent neceſſary for removing the ſymptoms which took place. This led me at once to ſay that both he and his wife ſhould immediately undergo a complete courſe of mercury. To this they ſubmitted, and in leſs than a year from the commencement of the courſe the later was delivered of a healthy child. Now here was only ground for ſuſpicion; but the event gave cauſe to imagine that if this kind of proof was to be ſet aſide where direct evidence cannot be procured, and which often happens in caſes of this kind, many conſtitutions would be irreparably injured, and many children loſt which otherwiſe might be ſaved.

During pregnancy mercury ought in every inſtance to be uſed in the form of unction, as we thereby with moſt certainty prevent it from acting upon the ſtomach and bowels, and thus avoid the hazard of abortion taking place as the effect of irritation upon theſe parts.

Nothing indeed more readily excites abortion than purgatives when ſevere in their operation upon the bowels, or when they even only produce any conſiderable degree of teneſmus; and as the internal exhibition of mercury is frequently the cauſe of this, it cannot but with much hazard be given in any conſiderable quantity during pregnancy.

SECTION VII.

Of ſome Peculiarities of Form under which Lues Venerea has appeared in Scotland and Canada.

I HAVE already had occaſion to remark that this diſeaſe has appeared with ſome peculiarities both in Scotland and in Canada. By the accounts received of it from Canada it ſeems to have appeared in that country in the ſame manner, and under

under the ſame form as it had a conſiderable time before done in Scotland; and as few have had more opportunities of ſeeing it here than I have had, I mean to give a ſhort deſcription of the appearances which it exhibits, and to mention the method of cure which hitherto has been found moſt effectual.

In the Highlands of Scotland this diſeaſe is uſually termed ſivvens or ſibbens: In Dumfries ſhire and Galloway it is commonly called the yaws, from a reſemblance which it is ſuppoſed to bear to the African and Weſt Indian diſeaſe of that name; but over the whole kingdom it is known to be the venereal diſeaſe. That this is ſo is certain from thoſe afflicted with it in every diſtrict where it has yet appeared having been able to trace it to ſuch an origin as left no room for doubt, as well as from the ſymptoms which take place in it bearing an exact reſemblance to thoſe of the later ſtages of Lues Venerea in the ordinary form of the diſeaſe, and from mercury being the on-

ly remedy upon which we can place any dependence for a radical cure.

It never appears, as I have elſewhere had occaſion to obſerve, in the form of Gonorrhœa, nor ſeldom at firſt in any form upon the genitals, owing to the manner in which it is moſt frequently communicated. The infection being for the moſt part received by eating or drinking out of the ſame utenſils with thoſe labouring under the diſeaſe, it often appears at firſt in the throat or ſome part of the mouth. In the mouth the ſores have the uſual appearances of venereal ulcers. This is likewiſe the caſe in the throat when the diſeaſe has been of ſome duration; but at firſt, and often for the ſpace of ſeveral weeks, although the patient complains of a good deal of uneaſineſs in ſwallowing, and of a conſtant hoarſeneſs, there is nothing perceived upon inſpection but a degree of tenderneſs, accompanied with an eryſipelatous redneſs of the amygdalæ, uvula, and velum pendulum palati. If not prevented, however, by

by the ufe of mercury, ulcers at laft form upon thefe parts, and commonly fpread more quickly than venereal ulcers ufually do in other parts of the body; infomuch that the uvula and amygdalæ will fometimes be entirely deftroyed in the courfe of a few days, and a degree of hoarfenefs and lofs of voice produced, from which the patient never afterwards recovers.

It is particularly apt to affect the internal parts of the nofe; and when the fores penetrate to the offa fpongiofa thefe foon become carious, and come away in fmall pieces along with the matter, which is always exceedingly fœtid. When not prevented by mercury the ulcers fpread to the hard bones of the nofe, and from thefe to the bones of the cheeks. In this manner the whole face becomes ulcerated, for when thefe bones are affected the contiguous foft parts likewife become foon difeafed. It is not uncommon for thefe ulcers to attack the eye-lids.

When the infection is not received by the mouth the diſeaſe appears in a variety of forms in different parts of the ſurface of the body. When the virus has entered the ſyſtem the parts upon which it firſt commonly breaks out are the genitals, the parts contiguous to the anus, the anterior parts of the thighs and legs, the under part of the abdomen, the breaſt, arms, fingers, and toes, and hairy ſcalp. It does not ſo readily fix upon the fleſhy parts of the legs or thighs, or on the back. In ſome the parts become covered with an infinite number of ſmall puſtules, and, as they are itchy, the diſeaſe is at firſt often miſtaken for itch. This happens the more readily from its prevailing almoſt entirely among the common people, who, from want of cleanlineſs, frequently labour under itch; and ſo much is ſibbens confined to this ſet of people, that excepting children, who are more particularly expoſed to receive infection from ſervants, thoſe in the higher ranks of life are ſcarcely ever attacked with it, at leaſt

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few inftances of their being fo have fallen within my obfervation.

This eruption, however, foon affumes appearances which fufficiently diftinguifh it from itch. The fkin upon which it is feated becomes thickened and fomewhat elevated, and acquires the characteriftic mark of venereal blotches, a peculiar copper-coloured appearance.

The late Doctor Gilchrift of Dumfries, in a paper upon this fubject, in the Phyfical and Literary Effays of Edinburgh, remarks, " that thefe fcabby eruptions are often met with on the fcalp, forehead, infide of the thighs, groins, and parts contiguous. Inflammation and excrefcences about the fundament are frequent; and it fometimes appears in the form of a herpes exedens, healing in one part and breaking out in another."

Some have fmall tubercles, or hard elevated knots upon the face, arms, and breaft, fomewhat refembling fmall pox at the height, but of a red or copper-colour, and accompanied with a painful degree of heat.

heat. If mercury is given early theſe tumours gradually ſubſide, otherwiſe they become large and diſcharge a fœtid viſcid matter, which forms into cruſts or flakes, and, on their falling off, the parts beneath are red, tender, and in ſome caſes in a ſtate of ulceration.

Inſtead of this more numerous eruption ſome are attacked with ſmall inflammatory boils, which do not readily ſuppurate, but remain for a conſiderable time hard and of a copper-colour, and at laſt diſcharge a thin bloody ichor. Theſe at firſt reſemble the common anthrax or carbuncle, but ſoon after burſting they aſſume all the appearances of the true venereal ulcer.

But the moſt characteriſtic ſymptom of this variety of ſyphilis is a ſoft ſpongy excreſcence, in ſize and colour reſembling a common raſp, which is apt to appear on all ſuch parts as either become ulcerated or that are attacked with any kind of eruption; ſivven or ſibben being in many parts of the Highlands the name of a wild raſp,

raſp, and this being a very frequent ſymptom of the diſeaſe, is the cauſe of its being diſtinguiſhed by this appellation. In ſome inſtances this ſpongy ſubſtance riſes to a conſiderable height, n can it be kept down by any of the common eſcharrotics; for although entirely removed, if the virus of the diſeaſe be not eradicated by the uſe of a full courſe of mercury, it ſoon returns to a greater extent than before; but as mercury is commonly given as ſoon as this ſymptom becomes evidently marked the excreſcence is ſeldom ſo much elevated as it otherwiſe would be.

Theſe fungous productions are occaſionally met with in every part of the body; but they are particularly apt to form on ſuch parts as have become tender, whether from previous eruption or from the cuticle having ſeparated and come off from the ſkin beneath; a circumſtance which ſometimes takes place in this diſeaſe, and when to any conſiderable extent, always with much inconvenience and diſtreſs.

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In the treatife which I have mentioned Doctor Gilchrift obferves that this difeafe does not attack the large and folid bones, and very rarely any of the others. I have however feen feveral inftances of the contrary, in which both the bones of the legs and arms have been affected; and it is by no means uncommon to find this difeafe fix upon the bones of the head. I have feen it indeed in every part of the body, and in every form under which Lues Venerea ufually appears, except in chancres upon the genitals. I have feen it produce fores refembling chancres upon the lips, and on the nipples of nurfes; and where an infection has been of long duration I have known ulcers form upon the penis, but I have not known an inftance of its producing chancres either in men or women from coition, owing, I imagine, to all who are attacked with ulcers upon thefe parts from this caufe avoiding venereal intercourfes, which they very univerfally do till a cure is obtained by a courfe of mercury; but although fibbens

is not ufually met with in the form of chancres upon the penis, this, as well as other parts of the genitals, are particularly apt to be attacked fuch ulcers as appear from the virus having entered the conftitution. In different inftances I have known the whole penis and fcrotum deftroyed with it, but this has commonly happened from the patient having neglected too long to call for medical affiftance, or from mercury being given in too fmall quantities.

Thefe ulcers, like the ufual form of venereal ulcers proceeding from the conftitutional form of the difeafe, do not commonly produce buboes. This, however, is not univerfal; for buboes fometimes take place in fibbens, not only from the primary ulcers of the difeafe, as I have in more than one inftance perceived in the arm-pit from fores produced upon the nipple in nurfing an infected child, but alfo from thofe which appear upon the penis and other parts of the genitals from the virus having entered the fyftem, and the appear-

appearance of buboes produced by ſibbens, whether in their ſwelled or ulcerated ſtates, is in every reſpect the ſame with that of the ordinary form of venereal bubo.

Syphilis, in whatever way the infection is communicated, is readily tranſmitted, as we have already had occaſion to ſee, from parents to the fœtus in utero, and this is particularly apt to happen in ſibbens. Sibbens therefore proves a frequent cauſe of abortions, although in ſome inſtances children are born with it at the full time, and in a few it breaks out in the courſe of the firſt month after delivery.

In the treatment of ſibbens, as of every variety of Lues Venerea, mercury is the only remedy upon which we can place dependence. Sarſaparilla, guaicum, and mezereon have occaſionally proved uſeful, but we truſt to mercury alone for a radical cure. The obſervations we have already had occaſion to offer on the employment of mercury apply with equal propriety to the treatment of every ſymptom of ſibbens. It is therefore unneceſſary to conſider the ſubject farther at preſent; but while we refer

refer for this purpofe to different parts of the preceding fections, I think it right to obferve, that a greater quantity of mercury is in moft inftances required for the cure of fibbens than we ufually find to be neceffary in the ordinary form of the difeafe. Relief is obtained with perhaps equal eafe, and a ftop may be put to the farther progrefs of the difeafe by the fame quantity that we employ for the common fymptoms of pox, but it is more apt to return if the medicine be not given in larger quantities, and continued for a confiderable time after every appearance of infection is removed. When the difeafe has been of long duration mercury ought to be continued for feven or eight weeks after every fymptom has difappeared.

A practitioner of experience and obfervation, and who had many opportunities of feeing every fymptom of fibbens, informed me that mercurius fublimatus corrofivus frequently proves fuccefsful in the cure of the more inveterate fymptoms of the difeafe when the milder preparations of

of mercury fail. He gave it in the form of drops. Sixteen grains were diſſolved in an ounce of water with the addition of eight grains of crude ſal ammoniac, and of this ten drops were given three or four times a-day.

When ulcers in the throat and other parts do not readily yield to the uſe of mercury we have recourſe to cauſtic and eſcharrotics, and they prove equally uſeful here as in every variety of ſore proceeding from Lues Venerea. In various inſtances they have been rendered clean and brought into a healing condition by fumigating with cinnabar, when they had previouſly reſiſted every other remedy.

The public, however, are equally intereſted in the prevention of this diſeaſe as in the cure of it, particularly in thoſe diſtricts where it has long prevailed, and with proper attention there is much reaſon to ſuppoſe that it might ſoon be eradicated. In ſome parts of Scotland this has already indeed been accompliſhed, and the means by which it has been done are ſimple

ſimple, and eaſily practiſed. They conſiſt entirely in a due attention to cleanlineſs and in preventing nurſes and other ſervants from being employed where there is the leaſt reaſon to imagine that they are infected. In the choice of a nurſe this is a point of the utmoſt importance; for in ſibbens, as in every form of ſyphilis, I have had many proofs of the diſeaſe being communicated by the milk alone, and as this is almoſt the only way by which it has found acceſs to families of rank, they are particularly intereſted in preventing it.

The chief difficulty which occurs to the prevention of this diſeaſe proceeds from thoſe who ought moſt anxiouſly to wiſh for it. The infected are ſo much afraid of a diſcovery being to injure their reputation that they do all in their power to conceal it, by which they are often prevented from taking mercury in that complete manner by which alone a cure can be accompliſhed. I know, however, that this anxiety for concealment may be removed,

moved, and, with proper attention, that thoſe poor people who otherwiſe would fall victims to the baneful effects of the diſeaſe may be eaſily induced to apply for medical aſſiſtance. The clergy have this ſo much in their power, that through their interference the ſibbens might ſoon be eradicated. In one pariſh this was actually done. The diſeaſe had ſpread to ſuch an alarming height that more than three-fourths of the inhabitants were infected, and many of the more delicate, particularly young children and females, died under it. This had gone on for many years, when by the exertions of the clergyman of the pariſh it was entirely removed in the courſe of a ſhort time. He went perſonally to every individual of his pariſh and convinced them of the propriety of applying for medical aſſiſtance immediately on the diſeaſe breaking out, which they agreed to the more readily from their being ſenſible that all of them had got the diſeaſe in the moſt innocent manner. In this way it was ſoon carried off,

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and by due attention to cleanlineſs, and avoiding all kind of intercourſe with thoſe who they ſuſpected to labour under it, the diſeaſe has now for a conſiderabletime been entirely ſubdued. This has in ſome degree indeed been the caſe in every diſtrict of Scotland where ſibbens ever prevailed. In ſome ſituations it has been nearly eradicated, and in none is it now ſo frequent as it was ſome years ago. There is much cauſe therefore to hope that by the ſuperior attention to cleanlineſs, which of late years has prevailed among our common people, it will ſoon become every where unknown.

If the diſeaſe as it prevails in Canada is the ſame with the ſibbens of Scotland, and from all that I have heard of it there is no cauſe to doubt of its being ſo, the ſame method of cure will prove effectual, and the ſame means of prevention muſt be obſerved.

SECTION VIII.

Of Prophylactics in Lues Venerea.

TO prevent infection is an object of the first importance in all diseases, but there is none in which our endeavours have proved less successful than in this. As the pleasures and safety of mankind are both interested, Prophylactics in Lues Venerea have long been an object of attention; but hitherto, notwithstanding all the boasted specifics with which every kingdom of Europe abounds, nothing has been discovered upon which any dependence can be placed.

At first view one would not doubt of ablution alone proving sufficient for preventing infection. As the parts to which the matter of infection is applied are altogether

gether external, and as a considerable length of time commonly elapses before any effects are produced by it, we might with confidence expect that bathing the parts in warm water, or any other liquid, could scarcely fail of removing the contagious matter. This, however, is not the case; for although some advantage may occasionally be derived from careful ablution we have daily proofs of its failure, even when practised with all manner of attention.

This must probably arise from the virus being either exceedingly subtile, or so very adhesive that it cannot be separated from parts to which it has found access by any means that have as yet been employed. In this view, therefore, two objects present themselves. Any application to be made use of should not only be of a very penetrating nature, but capable of destroying that connection by which the virus is thus made to adhere to the parts to which it is applied. I also think it probable that some advantage may be derived

from combining mercury with whatever is beſt adapted to theſe purpoſes. By acting as an antidote it may ſerve to deſtroy ſuch parts of the venereal poiſon as the others have not been able to remove.

Crude mercury, triturated with honey and with turpentine, and mixed with a ſufficient quantity of water, has been uſed as a waſh for this purpoſe; but the moſt convenient way of employing mercury here is in the form of a watery ſolution of corroſive ſublimate. It may be uſed of various degrees of ſtrength, from the quantity of one grain to three grains of mercury in the ounce of water. More than this proves irritating and corroſive.

As it is probable that the virus proves more adheſive than it otherwiſe would be by combining with the mucus of the parts to which it is applied, all ſuch articles as prove ſolvents of mucus, or that in a more particular manner deſtroy its tenacity, may with propriety be employed in the compoſition of an antiſyphilitic waſh.

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Upon this principle lime-water may be uſed with advantage; alſo the cauſtic fixed alkali, and even the cauſtic volatile alkali ſo diluted with water as to admit of their being applied with ſafety.

No harm can enſue from the external uſe of any of theſe articles in the form of a waſh, and more advantage, I have reaſon to think, may be derived from them than is commonly obtained from the uſe of thoſe ſecret ſpecifics which the intereſt of individuals and credulity of our young people have occaſionally brought into notice. I think it right, however, again to remark, that none of them can with certainty be relied upon, and that in no inſtance ought any of them to be injected into the urethra, as preventatives of Gonorrhœa. When the diſeaſe has actually taken place, they may, when much diluted, be uſed with freedom; but they cannot be employed but with much riſk of inducing inflammation when of ſuch a ſtrength as can have any influence in diſlodging the virus, by diſſolving or de-

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ſtroying the mucus with which it is combined. Whether theſe ſpecifics to which I allude have any of the articles which I have mentioned for their baſis or not I cannot determine, but when uſed as injections they often do much harm by exciting pain, and ſuch a conſtant inclination to paſs urine as proves exceedingly diſtreſsful.

SECTION IX.

Of Lues Venerea as inducing other Diſeaſes.

AS the virus of ſyphilis is often difficult to eradicate, and the diſeaſe being frequently known to break out again long after a cure has been ſuppoſed to be accompliſhed, the fears of patients have induced them to ſuſpect that it cannot with any certainty be removed after having appeared as a general diſeaſe of the ſyſtem,

system, and even to consider it as the cause of many other diseases.

Even practitioners have been divided in their opinions upon this. The result of my observation has already been given on the power of mercury in curing the disease. In section fourth of this chapter I have endeavoured to show that where failures have happened they must in a great measure have arisen either from the misconduct of patients when under mercury or from too small a quantity of the remedy being given. But while I am clearly of this opinion I at the same time think that Lues Venerea is often the cause of other diseases, which frequently prove fatal from want of a proper application of mercury, by which a cure of all of them might be easily obtained.

In the preceding parts of this work a description is given of all the ordinary symptoms of Lues Venerea, and of the method of treatment appropriated to each; but if the opinion which I am now endeavouring to support is well founded, this

disease,

diſeaſe, it is evident, muſt occaſionally appear under other forms.

We have already had occaſion to obſerve that Lues Venerea, when not interrupted in its courſe by the uſe of mercury, uſually makes a certain progreſs, and that the ſymptoms make their appearance with ſome regularity: But when mercury is employed, and not given in quantities ſufficient for eradicating the virus, although all the ſymptoms may thereby be ſuſpended, the diſeaſe will certainly appear either in the ſame or ſome other form at ſome future period. In this caſe the diſeaſe generally ſhows itſelf by one or other of the ſymptoms that have been deſcribed, but occaſionally we meet with it under a variety of other appearances; the virus, inſtead of producing the ordinary ſymptoms of Lues Venerea, tending rather to induce other diſeaſes.

This I know is denied by many, who allege that ſyphilis is never productive of other diſeaſes; but I have met with it in ſuch a number of inſtances, and theſe ſo

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evidently marked, that I consider the fact as certain. The virus of syphilis will not produce any disease that depends upon a specific contagion, such as small-pox, measles, itch, and some others, but I have much reason to think that a great variety of other diseases are induced by it. It may be asked in what manner can syphilis act in producing other diseases, and what evidence can be given of its ever having done so? In answer to this I may observe, that it is often difficult, and sometimes impossible, to explain the action of causes in producing diseases. We may easily, however, suppose, where the virus of syphilis exists in the system, but not in sufficient force to shew itself by the usual and more obvious symptoms of the disease, that it may, however, in various instances be capable of exciting a great deal of derangement, and even many diseases which otherwise might not take place, and that it will more especially be apt to produce those diseases to which the constitution is predisposed, or those to which

which the patient is rendered liable by exposure to particular occasional causes. If the virus can exist in the system for a considerable length of time without shewing any external mark of disease, and of this few I believe will doubt, it is difficult to conceive that it should not produce both general derangement and particular organic affections; and accordingly I believe that it more frequently does so than we are usually led to imagine. The evidence which I could give of this would be exceedingly ample, as I could relate a very extensive collection of cases in a great variety of diseases in which it actually happened; but the extent of this publication renders it necessary to confine the proofs of it within narrower limits. The diseases induced by the venereal virus, of which I shall give instances, are pthisis, asthma, rheumatism, dropsy, head-ach, epilepsy, and mania.

In the month of October 1783 I was desired to visit a gentleman at some distance from town, with an extensive foul ulcer

ulcer upon his left ſhoulder. This was mentioned as the moſt material part of his diſtreſs; but I alſo found that he had for ſeveral months laboured under all the moſt alarming ſymptoms of pthiſis, ſuch as ſevere cough, ſpitting of purulent matter, pains in the breaſt and ſides, night ſweats, quick pulſe, and an emaciated ſtate of body. Theſe ſymptoms, however, did not excite the attention of the patient nor of his friends ſo much as the ulcer upon his ſhoulder, which, from the great quantity of matter which it diſcharged, and the great length of time which it had endured, was conſidered as the cauſe of his weakneſs as well as of all the other ſymptoms.

The appearance of the ſore giving cauſe to think that it might be venereal, I mentioned this to the ſurgeon in attendance, as well as to my patient, with a view to diſcover whether from the hiſtory of the caſe, and from his previous courſe of life there was any ground for ſuſpicion. The anſwer which I received to this inquiry

was,

was, that ſoon after the firſt appearance of this ulcer, about three years before the time of my being conſulted, an ulcer had appeared in his throat, accompanied with ſome other ſymptoms of ſyphilis. For the removal of theſe he had been put under a long courſe of mercury, which had proved ſucceſsful; and as he had not ſince that period run any riſk of being infected he did not ſuppoſe it poſſible that the ulcer upon his ſhoulder, or any of his other ſymptoms, could be venereal. Having found, however, that the mercury, although long continued, had never been given in greater quantities than to render the mouth moderately ſore, and that for a conſiderable time an eruption reſembling venereal blotches had prevailed over his breaſt and arms, I did not heſitate to ſay that the infection had not been eradicated, and that he ought immediately to enter upon a full courſe of mercury.

The chief objection to this was the debilitated ſtate of our patient, and the quickneſs of pulſe, with other ſymptoms

of

of fever, which prevailed in a very conſiderable degree, the pulſe at this time beating upwards of 130 in a minute. Even theſe conſiderations, however, did not deter me from adviſing the uſe of mercury; having even at that time ſeen more than one caſe of a ſimilar nature, where the lungs were evidently affected, and in which a cure was obtained by mercury; and judging from the whole hiſtory of the caſe that the pthiſical ſymptoms might be kept up by the ſyphilitic virus, I obſerved to my patient, that if my conjecture was well founded, theſe ſymptoms, as well as the others, would gradually abate on the mercury taking effect. I alſo ſaid to his friends, that in ſuch circumſtances the mercury could not add much to his hazard, however ſeverely it might operate; the nature and ſeverity of his ſymptoms being ſuch as gave no cauſe to imagine that he could live above a few weeks if ſome unexpected alteration did not take place.

The

The patient himſelf having readily acquieſced a courſe of mercury was immediately preſcribed. At firſt he rubbed in a drachm of ſtrong mercurial ointment every evening. This came to be repeated morning and evening; and as his cough and fever were not increaſed by it, and the ſtate of his mouth enabling him to bear it, the quantity at each application was encreaſed at the end of eight days to a drachm and a half. The ulcer was dreſſed with common wax-ointment. About the end of a fortnight it became clean, which it had never before been, and any uneaſineſs with which it had previouſly been accompanied was now removed. The blotches upon his ſkin had begun to yield, and even the febrile ſymptoms, inſtead of being increaſed by the mercury, were ſomewhat abated. His mouth became exceedingly ſore; but although a good deal of ſalivation was excited the ſame quantity of mercury was continued. This I was induced to inſiſt upon from our having now very ſatisfactory evidence of all

all his symptoms being venereal, for even the cough and purulent expectoration became moderate in proportion to the quantity of mercury that was exhibited. By the end of the sixth week the cough was nearly gone; the blotches were almost entirely removed; the ulcer continued perfectly clean and much contracted, and his pulse did not now beat above ninety strokes in a minute.

In the course of a fortnight from this time, that is, after he had taken mercury for the space of eight weeks, scarcely any remains of the blotches could be perceived: The sore was reduced to the fourth part of its original extent; but about this period it became nearly stationary, for which it was touched every second or third day with lunar caustic. At the end of another fortnight it was completely cicatrised; but the infection having been of long duration, I judged it proper to continue the mercury three weeks longer, being thirteen weeks in all. He had now been many weeks entirely free of cough,

His pulſe was about its natural ſtandard; and as he had been allowed nouriſhing diet during the whole courſe, he was even conſiderably improved in appearance and ſtrength. By the beginning of the enſuing ſummer he was equally ſtrong as he had ever been at any period, and when I laſt ſaw him, about three years ago, he had continued entirely free both of Lues Venerea and pthiſis.

In the beginning of January 1784 I was deſired to viſit a patient newly come to town, with ſores on different parts of his body and limbs, and he had alſo for a conſiderable time been diſtreſſed with aſthma. It was chiefly however for the ſores that he applied for advice, as he had been led to conſider aſthma as a diſeaſe for which there was no remedy. There was one large ulcer immediately above the great trochanter of the right thigh; one upon the middle and moſt prominent part of each leg, both of which penetrated to the tibia; one upon the breaſt, where the ſternum appeared to be thickened, although

though not carious; one upon the right side, upon the seventh and eighth ribs; and a small sinous ulcer upon the middle and outside of the right arm, which, upon probing, was found to run to the surface of the ulna, which was rough for the space of an inch. Besides these there were several small ulcers upon the toes of both feet. These, as well as the others, were all foul, and discharged a thin, fœtid matter; and being accompanied with that erysipelatous kind of redness which frequently surrounds the margins of venereal ulcers, I was thereby led to suspect them to be of a venereal nature. The patient mentioned, as reasons for thinking that I was mistaken, that these ulcers were now of seven years continuance, and on the suspicion of their being venereal that he had taken mercury to a considerable extent at three different times, each course having been continued for nine or ten weeks; and although he had from all the three derived benefit, that none of the sores had healed by the effects of any of them, and that some of

them had even become worſe ſoon after the laſt courſe of mercury was left off. The aſthmatic ſymptoms were now of five years duration. They began without any obvious cauſe, and had gradually become more violent, nor had any remedy that had been employed for them given him relief, excepting opium, and even this was merely temporary. Beſides a conſtant difficult breathing, he was liable to periodical attacks of a more ſevere nature, which occaſionally came to ſuch a height as to endanger ſuffocation. Theſe occurred moſt frequently during ſleep, and, for the moſt part, with much regularity, about three o'clock in the morning.

The patient, who was now about forty-five years of age, acknowledged that in his earlier years he had ſuffered much from Lues Venerea, but having been led to ſuppoſe that he had already taken more mercury than was neceſſary, it was with difficulty that I perſuaded him to enter upon a farther courſe of it. The more, however, that I heard of the riſe and progreſs

gress of his complaints the more I was convinced of their being venereal; for besides the appearances of the sores which I have mentioned, I found upon enquiry that he had never taken a full course of mercury, for although it had always rendered his gums sore, he had never used it in such quantities as to require confinement. Neither had any of the attempts which had been made to cure the sores by external applications proved successful. A great variety had been employed, but although some of these had rendered them more clean than they had been before, and procured a discharge of better matter, no permanent advantage had been derived from any of them.

These considerations determined me to give a decisive opinion on the propriety of his taking mercury in larger quantities than he had ever as yet done. This induced him to agree to it, and he entered upon the course on the 14th of January. At first he rubbed in a drachm of mercurial ointment every night, and took

one of the blue pills evening and morning. In the courſe of eight days he uſed two drachms of the ointment daily, and the ſame number of pills were continued till his mouth became exceedingly ſore, and a good deal of ſalivation induced, which happened at the end of a fortnight. At this period the pills were left off, and only a drachm of the ointment employed daily. The common wax ointment was applied to the ſores, and renewed morning and evening.

Till he entered upon this courſe the ſores had at all times given him much uneaſineſs. They had never produced acute pain, but they were accompanied with an uneaſy, itchy ſenſation, which frequently deprived him entirely of reſt. Before the end of the third week this was completely removed; the ſores were become clean, and the diſcharge of a better conſiſtence; at the ſame time that his aſthmatic ſymptoms were by no means ſo ſevere. As by this he was convinced of the propriety of the courſe of mercury he readily ſubmit-

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ted to the distress and inconveniency which it produced, and kept his mouth fully affected during the whole time of it. By the beginning of March, that is, after having taken mercury for nearly seven weeks, all the sores were entirely heal excepting that upon the outside of the thigh and those upon the legs. Even these were much diminished, and the cure in all the three seemed to be retarded only by the state of the bones beneath, which were found to be denuded of the periosteum, and even in some parts rough. These, as well as the others, had been dressed with mild wax ointment from the first, and excepting the laying open the sinus upon the fore arm, no farther attention had been given to any of them. He now breathed easily, and had not experienced any severe fit of asthma from the time that his mouth became first fully affected with the mercury.

The course was carried on in the same degree to the end of the thirteenth week, when judging from the quantity of mercury employed, and the regular manner

in which it had been taken, that the virus by which his diseafe seemed to have been produced muſt be eradicated, I cauſed him leave it off. The aſthma was entirely gone, and all the ſores continued firm and well, excepting the three I have mentioned. I now ſuppoſed, however, that theſe were kept up entirely by the carious bones on which they were ſeated; and as a cure could not be looked for till the diſeaſed parts exfoliated, and as this might probably be tedious, I adviſed him, as ſoon as he could with ſafety venture upon a journey, to go home, and to do nothing with a view to the ſores but dreſſing regularly with red precipitate ointment in order to prevent the growth of a fungus, with which all the three were covered. This, with the occaſional uſe of calcined allum, prevented the fungus from being conſiderable; but it was not till a year had elapſed that any of the ſores healed. About this period an extenſive exfoliation appeared to be coming away from the tibia of the right leg. He now came

to

town, and by cutting into it I got it eafily out, and the fore healed in a fortnight. The fore on the other leg healed in a fimilar manner at the end of three or four months after a fmall fpiculated portion of the tibia had come away, but the ulcer upon the trochanter has not healed. Several fmall pieces of bone have from time to time come away, but I conclude that more muft be thrown out before a firm cicatrix will form; for although now reduced to the appearance of a narrow finus, which frequently heals, it always burft out again. It is not, however, productive of much inconvenience; and on account of the fituation of the bone, I think it better to truft to time alone than by means of any operation to attempt to promote the exfoliation of the difeafed parts. No return of afthma has taken place, and he is now in good health.

In the month of May 1789 I was defired to vifit a patient, by trade a brewer, aged forty, and very corpulent. For feveral years he had been liable to periodical

cal returns of aſthma, and during all that period his breathing had been difficult, inſomuch that he had for the moſt part been obliged to ſleep nearly in an erect poſture. He had been liable to frequent and very diſtreſsful palpitation of the heart, and his pulſe was at all times frequent and irregular. Other practitioners had previouſly been called, and, as is uſual in ſuch caſes, different opinions were formed of the cauſe of the diſeaſe. By ſome it was conſidered as gout; others judged it to proceed from hydrops pectoris, while by ſome it was ſuppoſed to conſtitute what of late has been termed angina pectoris. The patient himſelf, however, was of opinion, that all his ſymptoms originated from what he termed an ill-cured pox. He informed me that in his earlier years he had ſuffered much from frequent attacks of ſyphilis, and not having taken mercury in a regular manner; particularly from the laſt attack, and to which this affection of his breathing had ſucceeded: From this he was convinced,

vinced that the virus had not been eradicated.

No evident ſymptom of Lues Venerea, however, could be diſcovered; ſo that I could not venture to adviſe a courſe of mercury as my patient wiſhed me to do. Purgatives, diuretics, and bliſters, were repeatedly employed, but with no advantage; and ſome relief being derived from opiates, he was at laſt induced to truſt entirely to a large doſe of laudanum taken at bedtime and a leſſer doſe in the morning. In this ſituation I left him in the month of September, nor had I again occaſion to ſee him till the month of April 1790, when I was called on conſultation with the ſurgeon of the family for an ulcer which two months before had appeared upon the right ſide of the noſe. At firſt this ulceration was ſo inconſiderable as ſcarcely to excite his attention; but, as it ſoon began to ſpread, various applications were employed, from the mildeſt to the ſtrongeſt eſcharrotics; but although theſe, with the occaſional uſe of lunar cauſtic,

had

had proved uſeful, by preventing the growth of fungus which had previouſly prevailed, ſtill the ſore continued to extend, and at this time had ſpread to the oppoſite ſide of the noſe. Upon inquiry I found that in the month of November, ſome days after expoſure to infection, a chancre had appeared upon the glans penis; but as it healed by being twice touched with cauſtic, and which he had done without the knowledge of his ſurgeon, he had not thought it neceſſary to enter upon the uſe of mercury.

At this time the difficulty of breathing and diſtreſsful palpitation of the heart were more ſevere than they had ever been at any period; but the account which I had received of this recent infection, the progreſs which the ulcer was daily making, and the inefficacy which had already been experienced of local applications, determined me to adviſe an immediate and full courſe of mercury. Being informed that mercury did not readily affect him, both the internal and external uſe of it

was

was adviſed; ſo that in the courſe of ten days his mouth was rendered as ſore as he could poſſibly bear it, and he ſalivated to the quantity of between two and three Engliſh pints a-day. The ſore was dreſſed with common wax ointment.

In the courſe of three weeks from his entering upon the uſe of mercury the ſore was conſiderably diminiſhed, and at the end of ſix weeks it was entirely heal; but to the ſurpriſe and ſatisfaction of all concerned all his other ſymptoms became better on the mercury taking effect. The difficulty of breathing was ſoon much relieved, the palpitation vaniſhed entirely, and the pulſe fell to its natural ſtandard. It was ſeveral weeks before the aſthmatic affection left him entirely, but this happened before the end of the courſe, which was continued to the end of the third month; and he has not ſince that period experienced any return of his diſorder.

In this laſt caſe it may be a queſtion whether the patient laboured under ſy-

philis

philis at the time when I firſt ſaw him or not: He himſelf imagined that he did; and on finding afterwards that the diſeaſe in his breaſt was completely removed by mercury, when rendered neceſſary by the preſence of a more obvious ſymptom of the diſeaſe, I came alſo to be of the ſame opinion, and this induced me to give the mercury in large quantity, and to continue it longer than would have been neceſſary for the cure of a more recent infection.

In March 1787 I was conſulted by a gentleman of fortune in the ſouth of England. His caſe was deſcribed to be a ſevere rheumatic affection, with which he had been afflicted for the ſpace of eighteen months. After much expoſure to cold and wet weather in the courſe of hunting, he was attacked with ſevere pains in all his joints, particularly in the ſhoulders, wriſts, knees, and ancles. Theſe continued in ſome degree from the firſt approach of the diſeaſe, but he had occaſionally been diſtreſſed with ſevere pains

pains in his back, loins, and hip-joints, to ſuch a degree as not to be able to move for two or three weeks together but with an unſupportable increaſe of pain. His fingers and toes alſo became ſwelled and painful; and as the balls of the great toes had been particularly affected his diſorder by ſome had been conſidered as gout. At the time of my being conſulted the joints of his fingers were ſo much ſwelled that he could not even ſign his name, but the chief cauſe of his diſtreſs at that time was a ſwelling of his right knee. The ſwelling and pain in his other joints had at different periods prevailed in various degrees; they even at times left him entirely; but the right knee had continued ſwelled and painful from the firſt, and at this period it was repreſented as being nearly double the ſize of the other. There was accordingly much tenſion, and a very extenſive fluctuation had for ſeven or eight weeks been diſcovered in the ſuperior part of the tumour. The ſkin, however, was no where

where difcoloured. He was at this time thirty-two years of age. When firft attacked with the diforder he was full and vigorous, but now much emaciated. His pulfe, however, was good, for although for a confiderable time a good deal of fever prevailed, it had now left him entirely, his fkin was cool, and his pulfe between feventy and eighty in a minute.

The remedies he had employed were thefe: At firft he was repeatedly blooded; the pained parts had been rubbed with a variety of ftimulating applications, fuch as volatile linement and tincture of cantharides, and blifters had been frequently applied. He had taken James's powders, camphor, and opium; but the latter being the only remedy from which he derived relief, the others had long been diffufed. Sixty drops of laudanum taken at bed-time, and twenty-five in the morning kept him for the moft part tolerably eafy, but he experienced much diftrefs whenever thefe

were

were omitted. The following is the advice which I propofed to him:

1. That two drachms of a weak mercurial ointment, containing only a fifth part of mercury, fhould be rubbed upon the fwelling of his knee evening and morning for the fpace of twenty minutes each time, and continued five or fix weeks if it did not excite falivation.

2. That he fhould ufe a warm bath of fea-water every fecond night: The whole body to remain immerfed for the fpace of twenty-five minutes, or half an hour, and a quantity of the warm water to be poured from the height of three or four feet upon the fwelled knee at each time of ufing the bath.

3. Inftead of laudanum at bed-time, that he fhould take fifteen or twenty grains of Dover's powder.

4. That he fhould wear flannel next his fkin, not only upon the difeafed knee, but over his whole body.

5. If by thefe means the fwelling did not abate in the courfe of four or five weeks, that blifters fhould be applied to

it; the firſt to be applied upon that part of it in which the fluctuation was diſcovered, and the others alternately on each ſide of the joint.

I heard again from him in the month of June, when he informed me that he had been prevented from uſing the mercury by a phyſician who had been conſulted on the receipt of my opinion. Being afraid that his debility might be increaſed by the mercury, he had deſired that it might not be uſed, but all the other parts of the courſe which I had pointed out had been complied with. His general ſtate of health was better, and by the uſe of the warm bath and Dover's powder his pains had been much relieved, but they always recurred on theſe remedies being laid aſide, and the ſwelling of the knee was nearly in the ſame ſtate as when he firſt applied to me. Beſides this, he had been attacked with a painful ſwelling on the upper part of his right ſhoulder, which, after becoming red and tender, had ended in an extenſive foul ulcer. This giving riſe to much an-

anxiety, for the sore was daily becoming deeper, he was particularly anxious to have some remedy pointed out for it.

In return to this, I desired that the mercury might still be employed with a view to remove or lessen the swelling of the knee, and I gave him formulæ of different ointments as dressings for the sore on the shoulder. I said, however, that he must depend chiefly on the surgeon in attendance for the treatment of this sore; but being within forty or fifty miles of London, I advised him, if he did not soon get better, to go there for the advantage of a consultation.

I did not hear of him again till the month of September, when he arrived in Edinburgh. He now informed me that he had gone to London on the receipt of my second letter, and that he had been advised to the use of guaicum; a deep-seated pea issue had been inserted on the inside of the swelled knee; and different ointments had been given him to apply in succession to the sore on the shoulder. Having conti-

nued, however, under the regular application of theſe for upwards of two months, and no advantage accruing from them, he determined at laſt on coming here. The pains over his joints were ſtill very univerſal, almoſt every joint being more or leſs ſwelled, but they were not any where ſo ſevere as they had at firſt been. The ſwelling on the knee was very conſiderable, and a fluctuation was perceived, reaching from the patella, beneath the rectus muſcle, nearly to the middle of the thigh. The ſkin, however, was not diſcoloured, and the joint was ſtill in ſome degree capable both of flexion and extenſion. But the ſymptom which gave him moſt uneaſineſs was the ulcer upon his ſhoulder, which had now extended from the top of the ſhoulder over the clavicle, and down to the middle of the humerus. It had already deſtroyed ſome part of the deltoid muſcle, by which the motion of the arm was much impeded, and a conſiderable portion of the clavicle was become carious.

This ulcer he had lately been informed was of a scrophulous nature, but as to me it had many of the appearances of a venereal sore, I decidedly said so, and on inquiry I found that there was still farther cause of suspicion. About three months before he was first attacked with rheumatism two small chancres appeared upon the penis, which were removed in the course of eight er ten days by the application of caustic, and the use of a very small quantity of mercury. The quantity he could not exactly ascertain, but he knew that he had not taken it for a week, and that his mouth had never been sore with it. I also found, that nearly about the time at which his shoulder became sore, an eruption had appeared upon different parts of his body, particularly among his hair and on his breast, but which till now he had not mentioned, as he had not supposed it to be of any importance. This, however, along with the other circumstances of his situation, determined me to advise a full course of mer-

cury, and which he the more readily agreed to from every other remedy which had hitherto been tried having proved ineffectual.

He entered upon this courſe on the ſixth of October. At firſt half a drachm of the blue ointment was rubbed in evening and morning, and one of the blue pills, with two grains of opium, were given at bedtime. The opium was neceſſary not only for preventing purging, but from the patient having been in the habit of taking it. At the end of ten days, as the mouth was not affected, nor any other ſymptom produced by the mercury, the quantity both of pills and ointment was doubled. This, in the courſe of a fortnight, rendered the mouth exceedingly ſore, and produced ſome ſalivation; but the uneaſineſs excited by this was amply compenſated by the relief which he had obtained. Although the pains in his joints had abated they had ſtill given him much diſtreſs. This was almoſt entirely removed in the courſe of a day or two after his mouth became

came evidently affected, and being anxious to avoid the habit of taking opium, I found at the end of another week that he had left it off, and that he ſlept better without it than he had done for two years before. Still the knee continued nearly of the ſame ſize, but the ſore on the ſhoulder was much better. Under the ſame dreſſings which he had for ſome time been uſing the ſurface of the ſore ſoon became clean, the diſcharge was of a better conſiſtence, and much leſs offenſive, and in ſome parts new granulations had begun to appear.

The mercury was continued in ſuch quantities to the end of the third month as was neceſſary to keep the mouth completely ſore during the whole period, and during the courſe of the laſt of theſe months he drank daily an Engliſh quart of a ſtrong decoction of ſarſaparilla, guaicum, and mezereon *. At the end of ſix weeks all the ſwellings of the ſmaller

* Vide Appendix, Vol. I. No. 46.

joints, particularly thoſe of the fingers, were entirely removed, and even the fullneſs of the knee was conſiderably reduced. The ſore on the ſhoulder was already contracted to one half of its former ſize, and at the end of another fortnight the whole of it was cicatriſed excepting thoſe parts ſeated upon the carious part of the clavicle. At this time too the knee had aſſumed a very different appearance. It was not only much leſſened but the fluctuation above the patella was entirely gone. No application had been made to it but a portion of the mercurial ointment, which, morning and evening, was rubbed upon it. In the courſe of the tenth week a thin, long exfoliation took place from the clavicle, and the ſmall ſore which remained healed in a few days thereafter. He continued here for ſeveral weeks after the courſe was over, and on going away, although the knee was about an inch in circumference larger than the other, it gave him no uneaſineſs, not even in walking; but a very conſiderable degree of

ſtiffneſs remained in the joint of the right ſhoulder, and which I informed him might probably continue for a great length of time, perhaps even for life, owing to a conſiderable portion of the deltoid muſcle having been deſtroyed by the ulcer. In order to leſſen this ſtiffneſs as much as poſſible, I deſired, as ſoon as the ſkin was ſufficiently firm to admit of it, that the whole ſhoulder and arm ſhould be rubbed evening and morning with ſome emollient oil, and if no relief was obtained from this, that he ſhould go to Bath, and have the warm waters of that place pumped upon it. I found, however, after two years had elapſed, although in every other reſpect he continued well, that his ſhoulder remained in nearly the ſame ſtate.

Many caſes have fallen under my care of venereal pains which reſembled rheumatiſm ſo much that it was difficult to diſtinguiſh of what nature they were; but in a great proportion of theſe, circumſtances were diſcovered upon enquiry, by

by which the diſtinction was ſufficiently well marked. In this, however, as well as in ſome others which I have met with, the ſymptoms were for a long while ſo evidently rheumatic that there was not the leaſt cauſe to ſuſpect them to be venereal. Venereal pains almoſt univerſally fix upon the middle parts of limbs; very rarely upon the joints only. Now in this caſe the joints only were affected, as very commonly happens in rheumatiſm, and the patient had been much expoſed to the moſt frequent cauſe of that diſeaſe, while no ſymptom occurred that had any appearance of being venereal till theſe pains had continued upwards of twenty months. The ulcer on the ſhoulder was the firſt ſymptom that created ſuſpicion; for when I preſcribed the mercurial ointment, it was not, I muſt acknowledge, from thinking that the patient was infected with Lues Venerea, but from experience of its utility in ſimilar affections of the joints proceeding from other cauſes.

An

An officer of the navy, who had been expofed to hard fervice both in the Eaft and Weft Indies was feized with fevere rheumatic pains in fpring 1782. At firft they were confined to the large joints, but afterwards a forenefs prevailed over his whole body. He was about forty years of age, and till this time he had been ftrong and healthy.

All the remedies ufually employed in rheumatifm were advifed. Flannel was applied, and the pained parts were rubbed with a variety of ftimulating applications; blifters were applied to the parts that were moft painful; fudorifics were ufed in various forms; and in the courfe of the firft three years he had ufed a great variety of baths. He bathed at firft in warm falt water, and afterwards went both to Buxton and Bath; and he had laft of all ufed the cold bath. No advantage, however, was obtained from any of thefe; and at laft the only remedy which he employed was a large dofe of laudanum at bed-time.

He

He had frequently been liable to pain and ſome degree of fulneſs in the region of the liver, which he attributed to his reſidence in India. This, however, never gave him much uneaſineſs, till the winter of 1785, when a ſoft diffuſed ſwelling, larger than it had ever been, and accompanied with ſome pain, was perceived exactly on the ſite of the liver. The tumour became larger, and at laſt a fluctuation of matter was perceived in it. In this ſituation I firſt ſaw him in the month of April; and the chief reaſon of my being called was to judge of the propriety of diſcharging the matter by an operation. This, however, I found to be inadmiſſible. The matter lay ſo deep that it did not point any where, and the fluctuation was very obſcurely felt. I therefore in the mean time adviſed, that mercury, which he was then taking, ſhould be given in greater quantities, ſo as to render his mouth completely ſore, and, as he was much reduced in ſtrength, that his con-

constitution should be supported with light nourishing food.

As he lived at a considerable distance I did not expect to see him again, neither did I hear any thing of him till the month of February thereafter, when I was again desired to visit him. A considerable change had taken place in the nature of his complaints, and the following is the account which I received of it. His mouth had been rendered moderately sore with mercury, and in this situation it was kept for three weeks; but as it then gave him severe pains in his bowels, accompanied with purging, he did not afterwards use it in such quantities, nor was it judged necessary to do so, as the swelling, for which it was prescribed, was almost entirely carried off by what had already been done. It was therefore given in such quantities as his stomach and bowels could easily bear; and this being continued for the space of a month longer, that is, for six or seven weeks in all, it was then left off. During this course of mer-

mercury the pains which had ſo long diſtreſſed him were much leſs ſevere, and at one period they had left him almoſt entirely. While the weather continued mild in ſummer and harveſt they did not recur; but about the end of October they became more ſevere than they had ever before been. A few weeks, however, previous to this, ſymptoms of a more hazardous nature had made their appearance. In the month of September he was attacked with anaſarcous ſwellings of his legs, and ſoon thereafter with aſcites, which, notwithſtanding the uſual remedies employed in ſuch caſes, increaſed ſo quickly, that in the courſe of ſeven or eight weeks from the firſt approach of the ſwelling, it became neceſſary to draw the water off from the legs by punctures; and by the middle of December the diſtenſion of the abdomen was ſo conſiderable that the operation of tapping was judged adviſeable. Theſe operations, however, had procured only a temporary relief, for although the punctures had been frequently repeated, his

his legs, at the time of my being called to him, were much swelled, and his abdomen was more distended than at any period before the operation.

The chief reason, however, of my advice being taken at this time, was the appearance of some hard painful tumours upon his forehead, legs, and arms, one of which upon his right arm on the outside of the ulna, and another on the upper part of the os frontis, had burst some weeks before, and were now discharging a considerable quantity of a thin, fœtid, matter. The others, viz. two upon his forehead, one upon his left arm, and one upon each leg, were become very painful, and those on the head were discoloured, and contained such a quantity of matter as gave reason to think that they would also burst. The patient was at this time much emaciated, but he had no fever, and his skin was softer and his discharge of urine more plentiful than they generally are in dropsical complaints.

As the tumours resembled venereal nodes, and as the peculiar fœtor of the discharge from the ulcers, together with their sloughy appearance, gave farther cause of suspicion, I found, upon enquiry, that in September 1781, about six months before he was attacked with rheumatism, chancres appeared upon his penis, and a bubo in each groin, but that these symptoms were easily removed by the use of a small quantity of mercury, and a short confinement of eight or ten days, and that he had not since that period run any risk of being infected; that no other symptoms of the disease had appeared upon him, and that the only mercury he had used was that which was prescribed for the affection of his liver.

I now began to suspect even that the rheumatism with which he had been so long distressed was of the syphilitic kind, and my reasons for doing so were apparently conclusive. There was full evidence of infection being communicated, while

while it did not appear that he had taken half the quantity of mercury which the nature of the symptoms that ensued would have required. These pains occurred at such a distance from the other symptoms as tended to confirm the suspicion. They had not been relieved by any of the remedies which in the ordinary form of rheumatism prove for the most part useful, while they were for some time almost entirely removed by the mercury employed for the diseased state of his liver. These considerations, connected with the present appearances of the tumours and ulcers, determined me to say that he was poxed, and that he should begin to the use of such a quantity of mercury as his present situation would admit immediately upon the water in his abdomen being taken off, and which was done that very day.

Being afraid in his present state of debility of irritating his bowels by the internal exhibition of mercury, he was desired to use it in the form of unction only; and his

legs being ſtill much ſwelled and tender, he was made to rub it upon his arms and abdomen. In the courſe of a few days his mouth became ſore, and at the end of a fortnight he diſcharged three or four Engliſh pints of ſaliva daily. This was more than we wiſhed for, and he was deſired to leſſen the quantity of mercury; but as his pains were ſoon almoſt entirely removed, and the diſtreſs which he had experienced from the tumours and ulcers being alſo much leſſened, he was thereby ſo much convinced of the propriety of his preſent treatment that it was with ſome difficulty he was prevented from carrying the courſe of mercury too far. Care, however, being taken, to ſupport him with a light nouriſhing diet, and with a liberal uſe of wine, of which he took a bottle daily, he was enabled to bear the effects of mercury better than one in his ſtate of health might otherwiſe have been expected to do. At the end of eight weeks, during which period his mouth had been kept conſtantly and fully affected, he had

uſed

uſed twelve ounces of ſtrong mercurial ointment. His pains were now entirely gone; the ulcers were cicatriſed; and the tumours were ſo completely removed, that excepting thoſe on the forepart of the legs, none of them had left any fulneſs by which their former ſituations could be diſcovered. The matter contained in thoſe upon the forehead, and which at one period was juſt ready to burſt out, was entirely abſorbed, and only a ſlight diſcolouring of the ſkin remained; but what was ſtill more remarkable, no ſwelling had as yet occurred in the abdomen, and the anaſarcous fulneſs of his legs and thighs was almoſt entirely gone, although the punctures laſt made in them had been heal upwards of three weeks. The mercury was continued for five weeks longer, during which period four ounces of ointment was rubbed in, by which the mouth was kept as ſore as the patient could poſſibly bear it; and when at the end of the thirteenth week the mercury was left off no collection could be perceived in the

abdomen; and excepting a ſlight degree of œdema on the upper part of the feet, they were altogether free of ſwelling. Even this diſappeared in the courſe of a few weeks; and at the end of three years, when I had laſt an opportunity of hearing of him, he remained in good health.

The circumſtances of this caſe, while they give much cauſe to think that hydropic ſymptoms may be induced by the virus of Lues Venerea, tend alſo to ſhew that mercury given in ſufficient quantity acts with equal certainty in removing them as in the cure of any ſymptom of the diſeaſe. They alſo evince the power of mercury in the cure of that affection of the liver to which many are liable who have reſided in the Eaſt Indies; and that even the moſt advanced ſtages of that diſorder may be removed by a quantity of mercury that will not be ſufficient for the cure of Lues Venerea. It alſo appears, from the reſult of this caſe, that the matter which ſometimes forms in venereal

nodes

nodes may be collected in considerable quantity, and yet carried off by mercury. It may be proper, however, to remark, that where this takes place the tumours in which the matter is contained begin to diminish, almost as soon as there is evidence of the mercury having entered the system; and that when they do not diminish the matter should be discharged by a proper opening, in order to prevent it from affecting the bone beneath.

"About two years ago I was desired by a gentleman to visit his wife, who I found had been liable for more than a year to what she considered as scorbutic spots upon different parts of her body, one of which, seated on the sternum, had about three months before ended in an ulcer. At first the sore did not exceed the size of a sixpenny piece; but at this time it was very extensive, reaching from one mamma to the other, and almost from the inferior point of the sternum to the top of it. It was foul, and discharged a thin fœtid sanies. For upwards of three years she had been dis-

treffed with almoft a conftant head-ach, which occafionally was fo fevere as to deprive her entirely of fleep for many days together, and on fome occafions nearly of her reafon. It did not, like the aguifh head-ach, fix upon one fpot, but affected every part of the head alike. She was now about thirty years of age, and her menftrual flux regular. Till attacked with thefe head-achs fhe was healthy and rather corpulent; but now fhe was much reduced, being almoft entirely confined to bed with the violence of the pain, and fhe had fcarcely any defire for food. Blood-letting, blifters, bark, cold-bathing, and a variety of nervous medicines, had all been tried in vain.

The eruption upon the fkin, as well as the ulcer on the breaft, having the true venereal afpect, I enquired at the hufband whether he had of late been infected or not: He faid that he had not, but he candidly informed me, that foon after his marriage, which happened more than four years before, and when he had no reafon

to

think that he was infected, for he had no connection with any woman for a fortnight before marriage, and after having remained well for a fortnight thereafter, a chancre had appeared upon the preputium. Immediately upon this being perceived he applied to a surgeon, and was cured; and he had every reason to think that his wife had escaped; for although she had complained of a soreness in the pudendum about the same period, it had gone so entirely off without any mercury being given, that the surgeon, by whose advice he was directed, had assured him that it must have proceeded from some other cause. He also recollected that soon thereafter a painful tumour had formed in one of her groins; but as it also went off without coming to suppuration, and without the assistance of mercury, he had not supposed even that this symptom could be venereal, particularly as she continued in perfect health till attacked with the head-ach; and no symptom of pox

had ever appeared upon her, unlefs the eruption and ulcer already defcribed fhould be of that nature.

From the whole of this hiftory, the probability of the wife being infected with the venereal difeafe, and the neceffity of a mercurial courfe were abundantly evident. Mercury was accordingly exhibited. Opium, which fhe had hitherto employed for leffening the violence of her head-ach was continued, while the fore was dreffed with common wax ointment. Her mouth became fore in the courfe of a few days, and before the end of a fortnight fhe was under fome degree of falivation. The eruption foon began to leffen, and the fore from being exceedingly foul became clean and florid, at the fame time that the head-achs, for which no cure was expected, left her entirely: The mouth was kept completely affected; the blotches difappeared altogether in the courfe of fix or feven weeks, but the ulcer was not cicatrifed till the end of the eleventh week. The mercury being continued

tinued three weeks longer was then laid aside, and neither the head-ach or other symptoms have since recurred.

In the month of July 1781 a young man about seventeen years of age was put under my care in a very miserable situation. The account which I received from his parents was, that till his fourteenth year he was remarkably strong and healthy, and exceedingly clever. About that period he became delicate, and was taken from school, in order to have full attention paid to his health. Worms, and a variety of other causes were suspected to give rise to this state of delicacy, and various remedies were employed without effect, when after two years had nearly elapsed sores appeared on different parts of his body; his eyes became tender and inflamed, and at last he lost the use of one eye entirely, and about a year before I saw him he had been attacked with severe fits of epilepsy, which for the last two months had recurred several times a-day. He was now much emaciated, but his pulse was

was good, and the fits had not impaired his judgment.

Till this time he had been under the management of a phyſician, a relation of his own, who conſidering the complaints to be ſcrophulous, had preſcribed bark, ſteel, cicuta, and ſea-bathing; all of which, as well as different remedies for the epileptic fits, having been tried in vain, all hopes of a cure were loſt, and for a long while nothing had been employed. My opinion was aſked on account of the ulcers, ſome of which had of late become ſo painful that large doſes of laudanum were required to procure reſt. Beſides ſeveral ſmall ulcerated ſpots, there was at this time ſeven large foul ulcers on different parts of his body, none of which had given him much uneaſineſs while not deeper than the cellular ſubſtance; but having in different parts penetrated into the ſubſtance of muſcles, they began now to impede the motion of the parts on which they were ſeated, which added much to the diſtreſs which they excited.

His

His left eye exhibited a very singular appearance. It was somewhat enlarged, and that part of the tunica conjunctiva, which in a state of health is white, was of a deep red colour, while all the prominent part of the cornea opposite to the pupil was much thickened, and white like paper. He still retained the sight of his right eye, which, however, was much inflamed, and in a state of great irritability.

As the ulcers had a venereal appearance, particularly one upon the right side of his nose, and another on one of the temples, where it had penetrated to the muscle, I said so to the young man himself, and he confessed that he had all along been afraid of his disease being of that nature, but not being certain of this being the case, and afraid of incurring the displeasure of his parents, he had never till now, that enquiry was made concerning it, had the resolution to speak of it. The information he gave me was, that when he was about fourteen years of age he was infected by a woman with whom he had con-

connection, and that his ſymptoms had been ſores upon the penis and a ſwelling in the groin. Theſe, by the uſe of mercury, which he received from a young man, at that time a ſtudent in the univerſity, were removed; but as he had not taken it in a regular manner, and only in ſmall quantity, he had always entertained ſuſpicions of the ſymptoms which enſued being the conſequence of this infection. I now decidedly ſaid that he ought immediately to take mercury, and he entered upon the uſe of it that very evening. It was employed in the form of unction, and all the ſores, excepting that upon his noſe, were dreſſed with common cerate, the only application which he had hitherto made to them. As the ulcer upon his noſe had already begun to disfigure his face, I adviſed it to be touched with cauſtic every ſecond or third day, in order to ſtop the progreſs of the diſeaſe as quickly as poſſible, and beſides this it was dreſſed with baſilicon and precipitate. As the mercury did not readily affect his gums he was deſired to

take

take two of the blue pills every night at bed-time, and to continue to rub in the ſame quantity of ointment which he had uſed from the firſt, viz. a drachm evening and morning. In the ſpace of three weeks from the commencement of the courſe a conſiderable ſalivation was induced, which was afterwards kept up by the unction alone till the end of the fifteenth week. The ulcers had become clean, and put on a healing appearance ſoon after the mouth became ſore, and by the end of the ninth week they were all cicatriſed; but the infection having been of very long duration, and the ſymptoms more inveterate than uſual, I did not think it proper to adviſe the uſe of mercury to be ſooner left off.

The moſt remarkable circumſtance, however, in this caſe was, the cure which took place during the courſe of mercury of the fits of epilepſy. In leſs than three weeks they became leſs frequent, and not ſo violent as they had been before, and by the end of the ſixth week they did not

recur

recur above once in three or four days. Long before the courſe was finiſhed they vaniſhed entirely, nor was he ever diſtreſſed with them afterwards. His left eye ſtill continued white and opake, but the inflammation of the other being removed, he ſoon recovered the free power of viſion, of which he had long been entirely deprived.

A married lady, twenty-ſix years of age, after being for ſome time diſtreſſed with ſevere head-achs, was attacked with epileptic fits, which at firſt were neither frequent nor ſevere, but recurred at laſt ſo often that ſhe was commonly ſeized with three, four, or even more, daily. Preparations of copper and other remedies were employed without effect. In other reſpects her health was good, till at laſt, after the fits had been more than uſually ſevere for eight or ten days, ſhe became ſuddenly lunatic, from which time the epilepſy did not recur.

In this ſituation ſhe was kept at home for three or four months, but there being

no

no prospect of her recovering, she was at last put under the care of a family accustomed to take charge of lunatics. As her keepers were desired to apply to me in the event of her health requiring any particular attention, I was called to her after she had remained with them about two years, in order to give directions for the management of some sores which had appeared in different parts of her body a considerable time before. Besides several small foul ulcers upon her toes and feet, there was a large one upon the wrist of her right arm; one upon her side, which had penetrated nearly to the ribs, and two upon the upper and back part of her head, where the cranium was found to be carious. These ulcers, they informed me, were preceded by an eruption, which they considered to be scorbutic, but which I found upon inspection to be venereal. On this being stated to her husband he acknowledged that she might have been infected by him, but as she had never com-

plained

plained of any of the ſymptoms of Lues Venerea, he had hoped that ſhe had eſcaped.

A courſe of mercury was adviſed, but as her lunacy was of the moſt unmanageable kind, ſhe could not be made either to take the medicine inwardly, or to admit of the external application by unction. The latter might have been done by force, but the trouble of ſecuring her twice a-day for that purpoſe would have been conſiderable. Finding that ſhe was fond of oatmeal porridge, ſhe was allowed to take them both to breakfaſt and ſupper, and with each meal her keeper was deſired to mix a ſpoonful of a watery ſolution of corroſive ſublimate, in which was contained three quarters of a grain of this preparation. No obvious effect appeared from it till nearly the end of the third week, when her breath became affected, and her gums ſore and ſpongy; but although the ſame quantity of mercury was continued, no ſalivation took place. Simple dreſſings were applied to the ſores. It became neceſſary, however,

to

to make an incision along a considerable part of the left parietal bone, in order to discharge a quantity of fœtid matter which had lodged between the teguments and a portion of that bone, which was carious. All the rest of the sores soon put on a healing appearance. In the course of nine weeks they were completely healed, and during this period the maniacal symptoms also abated. In less than three weeks from the above period she became perfectly well, and no appearance of lunacy has since taken place, although several years have elapsed. The sore upon the left side of the head continued open for eight or nine months after the mercurial course was finished, owing to an extensive exfoliation from the parietal bone, which could not possibly be accomplished sooner.

These, as I have already observed, are only a few of a considerable number of cases of a similar nature which I might relate; but as the evidence which these afford, of the opinions which I have suggested being well founded, may be consi-

dered as ſufficient; any farther argument would be unneceſſary. The hiſtories which I have given are in proof, that the ſyphilitic virus may remain for a great length of time in the ſyſtem, without producing any of the ordinary ſymptoms of Lues Venerea: That other diſeaſes altogether different from Lues Venerea in the form under which it uſually appears, are, in ſome inſtances, induced by this virus. That the quantity of mercury commonly given in what is termed an alterative courſe may be ſufficient for curing the exiſting ſymptoms of Lues Venerea, and yet altogether inadequate, however long continued, for removing the diſpoſition. And laſtly, although a courſe of the alterative kind may repeatedly fail, that the ſyphilitic diſpoſition, as well as the worſt ſymptoms of the diſeaſe, may be removed by the proper exhibition of a full quantity of mercury.

APPEN-

APPENDIX.

THE following Appendix contains formulæ of all the medicines enumerated in this volume, as well as of ſome others occaſionally employed by other practitioners in the cure of Lues Venerea.

No. 1. *Emplaſtrum hydrargyri, vulgo, Emplaſtrum cæruleum, vel mercuriale. Ph. Edin.*

R. Olei olivarum.

Reſinæ albæ utriuſque partem unam.

Hydrargyri partes tres.

Emplaſtri lythargyri partes ſex.

Cum oleo et reſina, liquefactis ſimul, et dein refrigeratis, teratur hydrargyrus, donec evaneſcant globuli; tum paulatim ad-

datur emplaſtrum lythargyri liquefactum, et omnia accurate miſceantur.

Unguentum hydrargyri fortius, vulgo, Unguentum mercuriale. Pharm. Lond:

No. 2. R. Hydrargyr. purif. P. libras duas.
Adepis ſuillæ præparatæ P. uncias tres et viginti.
Sevi ovilli preparati P. unciam unam.

Tere primum hydrargyrum cum ſevo et tantillo adepis ſuillæ, donec globuli viſum fugerint; dein adde quod reliquum eſt adipis, ut fiat unguentum.

Unguentum hydrargyri mitius.

R. Unguenti hydrargyri fortioris partem unam.
Adepis ſuillæ preparatæ partes duas, miſce.

No. 3. *Pilulæ hydrargyri, vulgo, Pilulæ mercuriales. Pharm. Edin.*

R. Hydrargyri.
Mannæ, utriuſque unciam unam, pulve-

pulveris glycyrrhizæ uncias duas.

Tere hydrargyrum cum manna in mortario vitreo, donec illius globuli viſum penitus effugerint, addito prout opus fuerit, mucilaginis gummi arabici aliquantulo; dein pulverem glycyrhizæ adjice, et aqua fiat maſſa, ſtatim dividenda in pilulas quadringentas octoginta æquales.

No. 4. *Solutio mercurii gummoſa, vulgo, Plenk's ſolution.*

R. Mercurii vivi depuratiſſimi ʒi.
Gummi Arabici ʒ ii.

Terantur invicem in mortareo lapideo, addito medio, cochleari aquæ fumariæ, donec mercurius penitus diſpareat in mucum. Exacte ſubactis admiſce ſenſim conterendo.

Syrupi kermeſini ℥ ſs.
Aquæ fumariæ ℥ viii.

Sum. mane et veſpere, cochlearia duo.

Solutio Mercurii Alia.

R. Hydrargyr. purifs. ʒ ii.
Gummi Arabici ℥ fs.

Terantur invicem in mortareo lapideo, addito medio, cochleari aquæ, donec hydrargyrus in mucum difpareat. Huic fubacto adde.

Aquæ fontanæ ℥ ix.

No. 5. *Mel Mercuriale.*

R. Mellis;
Hydrargyri, utriufque unciam;

Terantur in mortareo marmoreo donec hydrargyri globuli non amplius appareant.

No. 6. *Hydrargyrus cum creta, vulgo, Mercurius alkalifatus. Ph. Lond.*

R. Hydrargyri purificati uncias tres.
Cretæ preparatæ uncias quinque
Tere fimul, donec globuli vifum fugerint.

No. 7.

No. 7. *Hydrargyrus calcinatus, vulgo, Mercurius calcinatus. Ph. Lond.*

R. Hydrargyri purificati libram unam.

Hydrargyrum in cucurbita vitrea, cui fundus planior ſit, in balneo arenæ, caloris 600°, expone, donec in pulverem rubrum concreverit.

No. 8. *Hydrargyrus muriatus corroſivus, vulgo, Mercurius ſublimatus corroſivus, Ph. Ed.*

R. Hydrargyri.

Acidi nitroſi diluti, utriuſque uncias quatuor.

Muriæ exſiccatæ,

Ferri vitriolati exſiccati, utriuſque uncias quinque.

Solvatur hydrargyrus in acido nitroſo, et vaporet ſolutio in maſſam albam penitus ſiccam; dein adde muriam et ferrum vitriolatum. Bene contrita et commixta indantur phialæ, quam fere dimidiam impleant;

pleant; et ex arena, primum igne leni, poſtea ſenſim aucto, ſublimentur.

No. 9. *Hydrargyrus muriatus mitis, vulgo, Calomelas, ſive mercurius dulcis.*

R. Hydrargyri muriati corroſivi, in mortario vitreo triti, uncias quatuor,

Hydrargyri uncias tres cum ſemiſſe.

Terantur ſimul in mortario vitreo ad extinctionem hydrargyri; pulviſque phialæ oblongæ, cujus tertiam tantum impleat partem, inditus, ex arena calida ſublimatur. Sublimatione peracta confractaque phiala, pulvis rubens circa fundum et albicans circa collum ejus pariter rejiciendus eſt, maſſa vero reliqua, ter quatuorve denuo ſublimanda, et in pulverem tenuiſſimum terenda.

No. 10. *Solutio mercurii ſpirituoſa.*

R. Mercur. ſublimat. corroſ. gr. x.

Solve in ſpirit. vin. gallic. ℥ xvi.

No. 11. *Pilulæ e mercurio ſublimato corroſivo.*

R. Mercurii ſublimati corroſivi.

Salis ammoniaci, utriuſque grana decem.

Aquæ diſtillatæ drachmam.

Conſervæ roſarum ſcrupulos duos.

Pulveris radicis glycyrhizæ, q. ſ. ut f. maſſa in pilulas octaginta dividenda.

No. 12. *Aqua phagadenica.*

R. Mercurii ſublimati corroſivi ſcrupulum unum.

Solve in aquæ calcis libram unam.

No. 13. *Hydrargyrus nitratus ruber, vulgo, Mercurius precipitatus ruber. Ph. Edin.*

R. Hydrargyri.
Acidi nitri diluti, utriusque libram unam.

Solvatur hydrargyrus, lentoque igne vaporet solutio in massam albam siccam; quæ in pulverem contrita, et cucurbitæ vitreæ inditæ, torreatur igne, sensim aucto, materia assidue bacillo vitreo agitata ut æqualiter incalescat, donec ejus pauxillum, cochleari vitreo exemptum et refrigeratum, squamulas splendentes rubras exhibeat. Tum vas ab igne removeatur.

No. 14. *Unguentum Hydrargyri Nitrati, vulgo unguentum Citrinum.*

Hydrargyri unciam unam.
Acidi nitrosi, uncias duas.
Axungiæ porcinæ libras duas.

Digere hydrargyrum cum acido nitroso super arenam calidam, ut fiat solutio, quam calidissimam adhuc misce cum axungia por-

porcina liquefacta, et denuo frigefcente; ftrenue dein mifturam fubige in mortario vitreo, ut fiat unguentum.

No. 15. *Hydrargyrus precipitatus cinereus, vulgo, Pulvis mercurii cinereus. Ph. Edin.*

R. Hydrargyri.
Acidi nitrofi diluti, paria pondera.

Mifce ut folvatur hydrargyrus, folutum aqua pura dilue, et adde aquæ ammoniæ quantum fatis fit ad hydrargyrum penitus ab acido liberandum; pulvis dein aqua pura lavetur et exficcatur.

No. 16. *Hydrargyrus vitriolatus flavus, vulgo, Turpethum minerale. Ph. Lond.*

R. Hydrargyri purificati libram unam.
Acidi vitriolici uncias quindecem

Mifta

Miſta in vaſe vitreo, gradatim incaleſcant donec coëant, et materia igne acri penitus exſiccetur. Hæc, plurima aqua diſtillata calida affuſa, ſtatim flaveſcet, et in pulverem fatiſcet, pulverem tere cum hac aqua in mortario vitreo. Poſtquam pulvis ſubſederit aquam effunde, et aqua diſtillata lava materiem donec ſaporis expers fuerit.

No. 17. *Pilulæ e mercurio acetato, vulgo, Trochiſci Keyſeri.*

R. Mercurii acetati.
Mannæ puriſs.
Pulv. gum. arab. utriuſque ʒi.
Aquæ roſæ, q. ſ. ut f. maſſa in pilulas ſexaginta dividenda.

No. 18. *Pilulæ e mercurio tartariſato.*

R. Mercurii tartariſat. ʒi.
Pulv. rad. glycyrhiz.
Conſerv. roſæ: utriuſque ʒ ii.
Mucilag. gum. arab. q. ſ. ut f. maſſa in pilulas ſexaginta dividenda.

No. 19.

No. 19. *Gargarisma e borace.*

R. Borac. purif. ℥ i.
Solv. in aquæ fontanæ bullientis
libram unam, et adde
Mellis optim. uncias duas.

No. 20. *Pilulæ Plummeri.*

R. Calomelanos.
Sulphuris aurat. antimon. utriusque unciam.
Conserv. Rosar. q. s. ut fiat massa.

No. 21. *Decoctum ligni guagaci.*

R. Rasur. ligni guajac. ℥ iss.
Rad glycyrhizæ ℥ ss.
Coq. in aq. fontanæ ℔ ii. ad ℔ iss.
Colaturæ adde.
Sacchari, q. s.

No. 22. *Decoctum sarsaparillæ.*

R. Radicis sarsaparillæ fissæ ℥ iii.
Aquæ bullientis libras tres.

In-

Infundantur per horas quatuor, dein expreſſo liquore probe contundatur radix, cui iterum adjice liquorem. Macera per haras ſeptem, poſtea coque ad libras duas, et fortiter expremendo cola.

No. 23. *Decoctum rad. mezerei.*

R. Corticis radicis mezerei, drachmam.
Radicis glycirrhizæ, drachmas duas.
Aq. fontanæ libras tres.
Coque ad libras duas.
Colaturæ adde
Syrup. altheæ unciam unam.

No. 24. *Pulvis ipecacuanhæ compoſitus, vulgo, Pulvis Doveri, Pharm. Lond.*

R. Ipecacuanhæ.
Opii purificati duri, ſingulorum in pulverem tritorum drachmam unam.
Kali vitriolati in pulverem triti unciam unam. Miſce.

No. 25. *Unguentum mercuriale album.*

R. Unguent. ſimplic. Ph. Edin. uncias duas.

Calomelanos drachmas duas. Miſce.

No. 26. *Unguentum mercuriale rubrum.*

R. Unguent. Barſilic. Pharm. Edin. unciam unam.

Mercur. precip. rub. pp^{tt}. drachmas duas. Miſce.

No. 27. *Unguentum ex Ærugine.*

R. Unguent. baſilic. Pharm. Edin. unciam unam.

Æruginis pulv. ſcrupulum unum. Miſce.

No. 28. *Unguentum ſaturninum, Pharm. Lond.*

R. Ceruſſæ acetatæ drachmas duas.

Ceræ albæ P. uncias duas.

Olei olivæ M. libram dimidiam.

Ce-

Cerussam acetatam, in pulverem tritam, cum aliqua olei parte contere; deinde eam ceræ, cum oleo reliquo liquifactæ, adde. Misturam agita donec refrixerit.

No. 29. *Linimentum ceræ Pharm. Lond.*

R. Ceræ albæ P. uncias quatuor.
Spermatis ceti P. uncias tres.
Olei olivæ M. libram unam.

Lento igne liquefacta assidue acriterque agita, donec refrixerint.

No. 30. *Linimentum lapidis calaminaris.*

R. Olei olivarum M. libram unam.
Ceræ albæ P. uncias duas.
Lapidis calaminaris præparati, P. unciam unam. M. S. A.

No. 31. *Emplastrum lythargyri, vulgo, Emplastrum commune. Pharm. Edin.*

R. Lythargyri partem unam.
Olei olivarum partes duas.

Adjecta aqua, coque, assidue agitans, donec oleum et Lithargyrus coeant in emplastrum.

No. 32. *Muriated Barytes.*

This preparation is obtained by diſſolving aerated barytes in the muriatic acid. The proceſs is not difficult, and I meant to have given a form of it; but as this article has never till of late been uſed as a medicine, as ſome varieties of the terra ponderoſa have lately been diſcovered, and as it requires ſome diſcernment to diſtinguiſh them, I think it better, in a point of ſuch importance, to refer to a more particular account of it than could be inſerted in this place. This is the more neceſſary, as the medicine, even in its pureſt ſtate, is of a nature that requires to be uſed with much caution; and particularly as many ſpecimens of barytes are found to contain conſiderable quantities of lead, copper, and arſenic.

The paper to which I allude is written by Doctor Adair Crawford of London, and is inſerted in the ſecond volume of Medical Communications. Doctor Craw-

ford, besides giving an accurate detail of the effects of this medicine in several cases of scrophula and cancer, gives directions for detecting the admixture of other substances, and for regulating the doses. The dose ought at first to be very small, not more than four drops for an adult, and two for children of eight or ten years. I have found, however, that when increased in a gradual manner, thirty drops may be given to an adult, and repeated two or three times a day; but as Doctor Crawford very properly observes, the quantity should not be farther augmented after it begins to excite nausea or any disagreeable symptom. I even think, that in such circumstances it should for a few days be omitted, and the dose lessened on being again entered upon. In the trials that I have made with it, no harm has ever been done by it, while in different cases of obstinate sores, proceeding from scrophula as well as other causes, it has evidently proved useful. Since I had occasion to mention

tion this remedy in a former part of this work, I have given it in twelve different cafes; but as moft of thefe are ftill under cure, I cannot with propriety give a detail of them. I may remark, however, in general, that the more experience I have had of it the more I am pleafed with it. Where no effect has been produced by it on the difeafe for which it was prefcribed it has feldom failed to excite appetite, and to improve the ftrength and general health of the patient. I therefore confider it as an important addition to our lift of tonics. Hitherto the folution which I have employed has been procured from London; but as I expect foon to be fupplied with a quantity of terra ponderofa, I mean to have it prepared here.

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FINIS.

ERRATA.

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Page 259. line 17. *for* fubfided *read* fubfifted.
306. — 7. *for* nearly *r.* ninety.
367. — 13. *for* of the lymphatics inftead *r.* of the lymphatics, when in a high degree, inftead.
368. — 2. *for* that inflammation *r.* that much inflammation.
408. — 18. *for* as warts are *r.* as warts on the genitals are.

Vol. II.

121. — 7. *for* ever *r.* often.
131. — 2. *for* hemoralis *r.* humoralis.
143. — . *for* lac *r* fac.
237. line laft *for* 19. *r.* No. 11.
286. line 14. *after* mercury *add* where the commencement of the purging could not be traced to fome other caufe